Recruitment and retention of Hispanic nursing students: through the lens of associate degree nursing program administrators and Hispanic nursing students

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RECRUITMENT AND RETENTION OF HISPANIC NURSING STUDENTS: THROUGH THE LENS OF ASSOCIATE DEGREE NURSING PROGRAM ADMINISTRATORS AND HISPANIC NURSING STUDENTS

by

Debra Jean Handlos DeVoe

A Dissertation

Submitted to the
Department of Educational Leadership
College of Education
In partial fulfillment of the requirement
For the degree of
Doctor of Education
at
Rowan University
October 15, 2015

Dissertation Chair: Carmen A. Jordan-Cox, Ph.D.
Dedications

I would like to dedicate this manuscript to my mother and father, Jane and John Handlos, Sr., as well as my three children, Margaret Jane Shaw, George Richard Miller, and Harry Edward Miller. During my dissertation process I have a new daughter-in-law Ashley Miller and a future daughter-in-law Anjelica Ortiz. My first granddaughter, Elizabeth “Ellie” Jane Shaw was born, my future grandson Matthew Ryan Miller is expected to arrive in 2016, and I will have a future step-grandson Noah Ortiz.
Acknowledgments

I would like to express my sincere appreciation to my Dissertation Chairperson Dr. Carmen A. Jordan-Cox for her guidance and assistance throughout this dissertation process. I always enjoyed the doctoral classes I had with her at Rowan University, and I was inspired by her global knowledge and experience in higher education.

I also want to thank my Methodologist Dr. James Coaxum who guided me with his expertise. He encouraged me to stay in the doctoral program when I was feeling like it was not the right program and especially since my mother passed away unexpectedly in my first semester of my doctoral studies.

Dr. Hector Lopez-Cardona was a wealth of information to me as the generalist on my dissertation committee. He assisted me in learning about the Hispanic culture. He enlightened me to expand the scope of my research.

I would also like to thank the Eta Mu Chapter (Rutgers University-Camden) of Sigma Theta Tau International for presenting me with a $500.00 research award which paid for the costs of the gift cards, travel expenses, and office supplies. I am very appreciative of the support of all my nursing colleagues from my employment site to those I work with in various professional organizations.

Most of all I would like to thank all the Hispanic nursing students who graciously gave their time to participate in this study as well as the nursing program administrators who sponsored me to conduct research on their campuses. Listening to the students perceptions was very enlightening and inspiring.
Abstract

Debra Jean Handlos DeVoe

RECRUITMENT AND RETENTION OF HISPANIC NURSING STUDENTS: THROUGH THE LENS OF ASSOCIATE DEGREE NURSING PROGRAM ADMINISTRATORS AND HISPANIC NURSING STUDENTS

2015-2016

Carmen A. Jordan-Cox, Ph.D.
Doctor of Education

The Hispanic population in the United States is changing and will constitute 30% of the population in 2050; however, the Hispanic registered nurse population is less than 3%. Cultural differences between patients and nurses may cause harm and a mistrust that can affect patient outcomes. A mixed methods convergent research study was done by an electronic survey, non-electronic surveys, telephone interviews, and focus groups to compare the perceptions of nursing program administrators at seven community colleges in a Mid-Atlantic state, in the United States, and the perceptions of 15 Hispanic nursing students regarding the challenges, barriers, and obstacles of Hispanic nursing students. Perceptions regarding recruitment and support services were surveyed. The results of the study identified the need for more effective recruitment and retention strategies to be conducted by nursing program administrators. The Hispanic nursing students felt that the majority of the faculty were supportive, but many challenges, barriers, and obstacles affect the students’ recruitment and retention in nursing school. Many suggestions of recruitment and retention strategies were shared by the Hispanic nursing students.

Keywords: Hispanic nursing students, cultural competence, retention, recruitment
# Table of Contents

Abstract .................................................................................................................................................. v

List of Figures ......................................................................................................................................... x

List of Tables .......................................................................................................................................... xi

Chapter I: Introduction .......................................................................................................................... 1

  Background of the Problem .................................................................................................................. 1

  Current Status of Hispanics in Higher Education .............................................................................. 2

  Implications for Hispanics in Higher Education .............................................................................. 4

  Statement of the Problem ................................................................................................................... 5

Cultural Competence in Health Care .................................................................................................... 8

Diversity in Nursing Education ............................................................................................................. 11

Purpose Statement ................................................................................................................................. 13

Research Questions ............................................................................................................................... 13

Operational Definitions of Terms .......................................................................................................... 14

Significance and Potential Contribution of the Study ............................................................................ 16

  Practice/Education .............................................................................................................................. 16

  Future Research ................................................................................................................................. 16

  Organizational Policy .......................................................................................................................... 16

Assumptions and Limitations ................................................................................................................. 16

Conclusion ............................................................................................................................................. 17

Chapter II: Literature Review ................................................................................................................ 19

  History of Hispanics and Legislation in Higher Education ................................................................ 19

  Hispanic-Serving Institutions ............................................................................................................. 21
# Table of Contents (Continued)

Student Development Theories

Schlossberg’s Foundational Theory

Torres’ Hispanic Identity Development Theory

Psychological Challenges, Obstacles, and Barriers

Academic Barriers

Faculty Attitudes

Community Colleges

Recruitment of Hispanic Nursing Students

Retention of Hispanic Nursing Students

Summary of the Literature Review

Chapter III: Methodology

Purpose Statement

Research Questions

Research Design

My Worldview as a Researcher

Sample-Nursing Program Administrators

Sample-Hispanic Nursing Students

Data Collection

Instrument & Procedure-Electronic Quantitative Surveys

Instrument & Procedure-Student Survey

Instrument & Procedure-Focus Group Qualitative Data

Procedure-Telephone Interviews
Table of Contents (Continued)

Data Analysis .......................................................................................................................... 55
Trustworthiness .......................................................................................................................... 58
Ethical Considerations .............................................................................................................. 59
Summary of Methodology ....................................................................................................... 60

Chapter IV: Findings ............................................................................................................... 61
Electronic Survey ...................................................................................................................... 61
Graduation and Retention Rates ............................................................................................... 61
Obstacles, Barriers, and Challenges .......................................................................................... 62
Student Survey .......................................................................................................................... 65
Focus Group/Telephone Interviews ........................................................................................... 70
Faculty Support ......................................................................................................................... 71
Diverse Faculty .......................................................................................................................... 74
Recruitment ............................................................................................................................... 75
Encouragement .......................................................................................................................... 75
Program Challenges ................................................................................................................ 76
Support Services ....................................................................................................................... 76

Chapter V: Findings, Recommendations, and Conclusion ...................................................... 77
Summary of the Study .............................................................................................................. 77
Comparison of Findings .......................................................................................................... 77
Research Question #1 .............................................................................................................. 77
Research Question #2 .............................................................................................................. 79
Research Question #3 .............................................................................................................. 80
# Table of Contents (Continued)

- Research Question #4 ................................................................. 81
- Research Question #5 ................................................................. 83
- Conceptual Framework .............................................................. 84
- Recommendations for Practice .................................................. 85
- Recommendations for Further Research ...................................... 85
- Recommendations for Nursing Education .................................... 86
- Recommendations for Leadership and Change ............................ 87
- My Transformational Leadership .................................................. 89
- My Reflective Practice ............................................................... 89
- Conclusion .................................................................................. 90
- References .................................................................................. 91
- Appendix A: Email Letter to Nursing Program Administrators ........ 102
- Appendix B: Rowan University IRB Approval ............................... 103
- Appendix C: Email to Request Student Participation ..................... 104
- Appendix D: Recruitment Flyer for Hispanic Nursing Students .......... 105
- Appendix E: Online Nursing Program Administrator Survey .......... 106
- Appendix F: Student Survey ........................................................ 110
- Appendix G: Informed Consent .................................................... 113
- Appendix H: Audiotape Consent .................................................. 117
- Appendix I: Student Focus Group Questions ................................. 119
## List of Figures

<table>
<thead>
<tr>
<th>Figure</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure 1. Comparison of Nursing Diversity to General Population (Wood, 2015)</td>
<td>6</td>
</tr>
<tr>
<td>Figure 2. Percentage of Minority Students Enrolled in Basic RN Programs and in All US Degree-Granting Institutions by Race-Ethnicity (Adapted from NLN, 2013)</td>
<td>7</td>
</tr>
<tr>
<td>Figure 3. Percentage of Minority Students Enrolled in Basic Associate Degree Nursing Programs by Race-Ethnicity and Program Type, 2013</td>
<td>7</td>
</tr>
</tbody>
</table>
## List of Tables

<table>
<thead>
<tr>
<th>Table</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Table 1. Comparison of SCC and NCC 2013</td>
<td>46</td>
</tr>
<tr>
<td>Table 2. Methods Matrix</td>
<td>50</td>
</tr>
<tr>
<td>Table 3. Data Analysis Table</td>
<td>57</td>
</tr>
<tr>
<td>Table 4. Statistics Questions #1 to #10</td>
<td>63</td>
</tr>
<tr>
<td>Table 5. Summary of Question #11: What Have You Observed as the Challenges, Barriers, and Obstacles for the Hispanic Nursing Student?</td>
<td>64</td>
</tr>
<tr>
<td>Table 6. Summary of Question #12: What Has Been the Most Successful Means to Recruit Hispanic Nursing Students to Your College?</td>
<td>65</td>
</tr>
<tr>
<td>Table 7. Summary of Question #13: What Has Been the Most Successful Means of Retaining Hispanic Nursing Students at Your College?</td>
<td>65</td>
</tr>
<tr>
<td>Table 8. Summary of Student Survey Questions #1 to #6</td>
<td>66</td>
</tr>
<tr>
<td>Table 9. Summary of Student Survey Questions #7 to #14</td>
<td>68</td>
</tr>
<tr>
<td>Table 10. Summary of Student Survey Question #8A: What Do You Consider to be Support Services?</td>
<td>69</td>
</tr>
<tr>
<td>Table 11. Summary of Support Systems</td>
<td>70</td>
</tr>
<tr>
<td>Table 12. Summary of Barriers That Might Prevent Students to Apply to Nursing School</td>
<td>72</td>
</tr>
<tr>
<td>Table 13. Most Effective Ways for Students to Learn</td>
<td>74</td>
</tr>
</tbody>
</table>
Chapter I

Introduction

Background of the Problem

The Agency for Healthcare Research and Quality (AHRQ, 2013) released a healthcare disparity report in 2013 that stated Hispanics/Latinos “received poorer quality of care than Whites in 40% of quality measures” (p. 14). For many decades, the elimination of healthcare disparities has been a national priority of the Healthy People 2020 project (HealthyPeople.gov, 2011; Mayo, Sherrill, Truong, & Nichols, 2014). A progressive change is occurring in the ethnic composition of the United States. As of 2013, there are roughly 54 million Hispanics living in the United States, representing approximately 17% of the U.S. total population, making people of Hispanic origin the nation's largest ethnic or racial minority (Center for Disease Control [CDC], 2014). In 2050 the Hispanic population will constitute 30% of the United States population (Lynch, 2012). An increase of Hispanics has major implications for higher education and healthcare.

There are many individual perspectives on the Hispanic population in higher education. The general public often believes that 1) Hispanics have little interest in attending college; 2) Hispanic parents do not encourage their children to attend college; 3) Hispanic students do not seek financial aid; 4) Hispanic students have few educational role models; 5) Hispanic Serving Institutions (HSIs) take resources away from other institutions; and 6) HSIs are not prominent figures in the community (Laden, 2004). Many educators are unaware of the history of Hispanics in higher education. A lack of understanding of the Hispanic students’ needs and cultural backgrounds can
adversely impact Hispanic student success. This lack of understanding about the Hispanic culture may affect the retention of Hispanics in higher education and affect the availability of Hispanics in the workforce. The healthcare arena has experienced an increase in the Hispanic patient population and needs more Hispanic nurses who understand the culture. The challenges for both higher education and healthcare need to be identified, and strategic planning needs to occur to accommodate the rise in the Hispanic population. Who will recruit the Hispanic student to higher education institutions, and how will the health care educators assist in this endeavor?

For the purposes of this study, the term “Hispanic” will be used to identify the population that is the focus in this research study. The most commonly used term on the West Coast is “Latino/a,” while on the East Coast of the United States it is “Hispanic.” The term Latino/a may be used if a certain citation uses that term; otherwise the terms Latino and Hispanic are often used interchangeably.

**Current Status of Hispanics in Higher Education**

According to the Pew Research Center’s Hispanic Trends Report (Roach, 2013) “the higher education enrollment rate of Latino high school graduates surpassed that of White high school graduates in 2012 for the first time” (para 1). This increase has been attributed to the higher number of Hispanics in the population and their likelihood of being enrolled in higher education. Sixty-three percent of Hispanics ages 25 and older had at least a high school education in 2011 (Roach, 2013). A bachelor’s degree was attained by 14.5 percent of Latinos ages 25 and older (Roach, 2013).

From 1995 to 2013, the percentage of 25 to 29 year-olds who had attained a master's or higher degree increased for Whites (from 5 to 9 percent), Blacks (from 2 to 3 percent), Hispanics (from 2 to 3 percent), and Asians/Pacific Islanders (from 11 to 21 percent). In 2013, the gaps in the attainment of a master's degree or
higher between Whites and Blacks (5 percentage points) and between Whites and Hispanics (6 percentage points) were wider than in 1995 (when both gaps were 4 percentage points). (United States Department of Education, National Center for Education Statistics, 2014, para 6)

These statistics will challenge higher education institutions to recruit Hispanic students to their campuses and thus increase their own diversity of students.

Close to seven percent (6.8 %) of both undergraduate and graduate students who were enrolled in college in 2012 was Hispanic (U.S. Census Bureau, 2012). Although the Hispanic population has grown on college campuses, they still lag in obtaining bachelor’s degrees: only 14 percent compared to 51 percent of Asians, 34 percent of Whites, and 21 percent of Blacks (Roach, 2013). Graduation statistics prove that Hispanics have the ability to obtain a college education. Fry and Lopez (2012) state “over the past four decades, the number of Hispanics graduating with either an associate or a bachelor’s degree has increased seven-fold, with growth outpacing that of other groups” (para. 1).

Specific higher education institutions are focused on the Hispanic student population. Hispanic-serving institutions (HSI's) are “accredited degree-granting college and universities with Hispanic students accounting for 25 percent or more of the undergraduate enrollment” and in 1998 under Title V-Developing Institutions, the new definition was “25 percent Hispanic fulltime students in their undergraduate population” (Gasman, 2008, p. 23). “While HSIs only represented five percent of all two year institutions in the United States they awarded 42 percent of all associate degrees earned by Latinos [Hispanics] in 2003-2004. While HSIs made up only two percent of all four year institutions, they award almost 40 percent of all baccalaureate degrees earned by Latinos [Hispanics]” (Excellencia, 2006, para. 8). Addressing the Hispanic student
population entering higher education, based on the previous information, should be a key goal for the various admission offices on higher education campuses.

**Implications for Hispanics in Higher Education**

The current status of Hispanic students in primary school will impact the higher education arena, due to the increase in Hispanic high school graduates. It is important in higher education, whether one is an educator or an administrator, to be aware of the various state and national initiatives that are focused on the Hispanic population. This information illuminates for the educator the need to promote higher education for Hispanics. A current education goal, established by President Obama, is for the United States to be the leader in college degrees earned in proportion to the population, which puts increased emphasis on Hispanic college attendance (Lynch, 2012). Hispanics will need to increase their enrollment in colleges, obtain financial aid packages, obtain family support, while the institutions will need to strategize how they will recruit and retain more Hispanic students. Non-Hispanic students will also need to assist in reaching the President’s education goal by increasing their enrollment in college and successfully graduating. Hispanic students have lagged behind in enrollment in higher education, therefore it puts more strain on them to catch up to their non-Hispanic peers. Hispanics should not own the full responsibility of entering into higher education. The higher education arena is challenged to recruit and retain more Hispanic students. There need to be incentives by the state and federal government and higher education institutions to encourage Hispanic student enrollment and retention.

The Hispanic population will be rising so quickly, thus this population will need to be more educated on how to be a valuable part in reaching the President’s goal.
Institutions need to publicize that they are an HSI and be proactive in recruiting Hispanic students and providing interventions to retain and graduate them. Publication of the institution’s HSI designation may increase their Hispanic student population because the students will know there is a higher percentage of Hispanic students on the campus based on the institution’s HSI designation. The Hispanic student may feel more engaged and have more comfort at this type of institution rather than on a non-HSI campus. On the other hand, non-HSI’s need to increase their recruitment and retention of Hispanic students, in order for their campuses to be multi-culturally diverse.

Enhancement of the cultural sensitivity of faculty is necessary, due to the increase in the Hispanic population that will enter higher education, and because of the increased growth in the population of Hispanics. Since many Hispanics are being educated in institutions that have a large number of other ethnic groups, such as White students, there need to be student civility and sensitivity programs. The increase in Hispanic students obtaining post secondary education will increase the diversity of the workforce. They will be more educated and have more opportunities for higher level jobs. There will be a major gain of diversity in the healthcare arena that currently has a low number of Hispanic health care professionals. The Hispanic students should be encouraged to enter into professional jobs.

**Statement of the Problem**

The lack of Hispanic students in higher education is affecting the pipeline of future professionals in health care. There are an inadequate number of Hispanic registered nurses in the United States. Currently the Hispanic population is approximately 17% of the United States population; however, less than 3% of the registered nurse (RN)
population is Hispanic, as shown in Figure 1 (Doutrich, Wros, Valdez, & Ruiz, 2005; Wood, 2015). The National League of Nursing (NLN, 2013), an organization that accredits nursing programs, states that minorities constituted 26% of students enrolled in all pre-licensure nursing programs throughout the United States in 2011-2012. The Hispanic student enrollment population was 7% of the 26% of minorities enrolled in pre-licensure nursing programs, as seen in Figure 2 (NLN, 2013). The number of Hispanics in pre-licensure associate degree nursing programs is 6% as shown in Figure 3 (NLN, 2013).

<table>
<thead>
<tr>
<th>Ethnic or Gender Group</th>
<th>Registered Nurse Population</th>
<th>General Population</th>
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<tbody>
<tr>
<td>Caucasian</td>
<td>83%</td>
<td>77.7%</td>
</tr>
<tr>
<td>African American</td>
<td>6%</td>
<td>13.2%</td>
</tr>
<tr>
<td>Asian</td>
<td>6%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>3%</td>
<td>17.1%</td>
</tr>
<tr>
<td>American Indian/ Alaskan Native</td>
<td>1%</td>
<td>1.2%</td>
</tr>
<tr>
<td>Native Hawaiian/ Pacific Islander</td>
<td>1%</td>
<td>0.2%</td>
</tr>
<tr>
<td>Females</td>
<td>93%*</td>
<td>51%</td>
</tr>
<tr>
<td>Males</td>
<td>7%*</td>
<td>49%</td>
</tr>
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*Figure 1. Comparison of Nursing Diversity to General Population (Wood, 2015).*
Figure 2. Percentage of Minority Students Enrolled in Basic RN programs and in All US degree-Granting Institutions by Race-Ethnicity (Adapted from NLN, 2013). Series 1 Bottom Bar=All US College Students (2010) Series 2 Top Bar= Basic RN Students

Figure 3. Percentage of Minority Students Enrolled in Basic Associate Degree Nursing Programs by Race-Ethnicity and Program Type, 2013. African American = 9%; Asian/Pacific Islander = 4%; American Indian = 1%; Hispanic = 6%; other = 7% (Adapted from NLN 2013)
Many researchers have identified the need to increase minorities in the RN workforce (Condon & Sharts-Hopko, 2010; Dowell, 1996; Evans, 2008; Gilchrist & Rector, 2007; Leonard, 2006; Noone, 2008). The lack of minority representation in nursing programs is possibly due to the lack of federal funding and short-term recruitment, when the recruitment efforts are sporadic and not consistent (Doutrich et al., 2005). Increasing the minority workforce in the health professions is important because it will be “more reflective of our national and regional ethnic and racial mix” (Gilchrist & Rector, 2007, p. 1). An increase in the Hispanic nurse workforce, in particular, will assist the Hispanic patient to build a quicker bond or rapport with the Hispanic nurse, because the Hispanic nurse is more aware of the patient’s Hispanic culture. Research has been conducted which specifically supports increasing the Hispanic student population in nursing programs (Bond et al., 2008; Cavazos, Johnson, & Sparrow, 2010; Doutrich et al., 2005; Villarruel, Canales, & Torres, 2001). Hispanic students were researched in the Pacific Northwestern region of the country and, based on some of the findings, there is a definite need for increasing cultural competence of “everyone-administrators, faculty, staff, and students” (Doutrich et al., 2005, p. 168).

**Cultural Competence in Health Care**

What is the impact of not having enough Hispanic registered nurses? Beyond the need to have a nursing workforce that is reflective of the changing United States demographics, it is important to provide culturally-competent care to patients. Being a Hispanic nurse does not necessarily make one culturally competent; however, if the Hispanic nursing population was increased, there would be a pipeline of potentially more
Hispanic nurses knowledgeable in the Hispanic culture who could assist in promoting positive patient outcomes.

The Centers for Disease Control ranks Hispanic women in the United States as a Medically-underserved group that lacks access to health education and preventive health care, resulting in higher rates of disease than in non-Hispanic whites (Oomen, Owen, & Scruggs, 1999). The Sullivan Commission on Diversity in the Health Workforce (2004) describes the “missing persons” due to the lack of minorities in the health care field that “is compounding the nation’s persistent racial and ethnic health disparities” (p. i). The Sullivan Commission (2004) expressed concerns that include: 1) schools of medicine, dentistry, and nursing programs are the last to integrate their classrooms, 2) health profession organizations have been slow in recruiting minorities, 3) a lack of diversity will not strengthen cultural competence throughout the health system, and 4) cultural competence influences how professionals deliver health care. A recent article from the Cooper Medical School of Rowan University discussed that only 4% of the physician workforce is Latino/a and African American (Rowan Today, 2015).

Davidhizar, Dowd, and Gigar (cited in Gilchrist & Rector, 2007) “assert that future nurses need to know how to respond to those from other cultures and this requires a critical mass of practitioners from that culture” (p. 278). Oomen et al. (1999) reflect that “cultural ignorance from the dominant, Anglo-Saxon medical community can lead to feelings of mistrust between healthcare providers and multiethnic patients” (p. 223). A lack of knowledge of the Hispanic language can also affect treatment if a Spanish-speaking Hispanic patient has a language barrier with a healthcare provider (Oomen et al., 1999). Lipton, Losey, and Giachello (1998) agree that a mutually-trusting
relationship between the patient and provider is a form of encouragement and thus increases the chances of adherence to a treatment program. A trusting relationship can be developed by an understanding of each other’s culture and being able to effectively communicate in similar languages.

Childers (2014) emphasizes that as “immigration increases the demand for bilingual and multilingual nurses continues to grow” (p. 15). According to the United States Census Bureau, the number rose 158% for those people who speak another language other than English, mostly Spanish (Childers, 2014). Bilingual nurses can assist in reducing fears of those who cannot speak English, and Hispanic nurses can be on the forefront of bridging this cultural gap.

To develop an effective trusting relationship with patients, nurses need to acknowledge the patient’s culture. Cang-Wong, Murphy, and Adelman (2009) believe that “misunderstanding cultural differences can be a barrier to effective health care intervention and can even cause harm” (p. 32), or health care professionals might overlook or misinterpret a patient’s perspective that is different from their own. Often registered nurses and other health care personnel waste time looking for someone to interpret for them if the patient speaks another language. Many Hispanic people speak Spanish, and it is necessary for them to understand what they are being told, regarding their health care, rights, and decisions. The Joint Commission (TJC) (2007), formally known as the Joint Commission on Accreditation of Healthcare Organizations, that accredits hospitals requires that any interpretation be done by certified interpreters, and therefore hospitals have language phone lines that can be used if this is necessary, however the phones are intimidating to patients and do not have a personal touch.
Diversity in Nursing Education

Stewart and Cleveland (2003) assert that the nursing profession needs to look at racial diversity in the population. The American Association of Colleges of Nursing (AACN, 2013) advises that nursing programs should strive to increase their racial and ethnic diversity of students in order to mirror the ethnic and racial make-up of the patients. Grady (2014) posits that the increase in cultural diversity in the United States does impact nursing practice as the ethnic diversity rises within patient populations.

Coffman, Rosenoff and Grumbach (2001) believe that “increasing the number of Latino nurses requires a strategy that enhances overall educational attainment and more effectively recruits and retains college-bound Latinos in nursing programs” (p. 269). Leonard (2006) emphasizes that “it is necessary to examine what is being done in schools to promote diversity” (p. 89) and that “the current projected demographic make-up of the country will be reflected in health care and health care education” (p. 89).

The continued under-representation of African Americans, Hispanics, and Native Americans in health professions has been reported by organizations that are key in accrediting the schools of nursing, and overseeing the health care workforce, such as the National League of Nursing (NLN), the Health Resources and Services Administration (HRSA), the American Association of Colleges of Nursing (AACN), and the Institute of Medicine (IOM), (AACN, 2013; HRSA, 2013; IOM, 2001; NLN, 2009). Professional organizations that are advocating for more Hispanic nurses include the National Association of Hispanic Nurses (NAHN) and the American Nurses Association (ANA) (ANA, 1991; NAHN, 2014). These organizations have developed mission statements and goals based on the knowledge that the Hispanic population of nurses needs to be
increased. In order to obtain more Hispanic nursing students “nursing educators and administrators must provide leadership in evaluating institutional policies, recruitment efforts, and retention strategies of Hispanic/Latino nursing students” (Taxis, 2002, p. 258). Looking beyond the walls of the colleges, Taxis (2002) encourages nurse educators to find ways for “community support and collaboration in designing flexible, culturally sensitive programs” (p. 259) for the Hispanic nursing student. The National Association of Hispanic Nurses (2014) has two goals that relate to increasing the number of Hispanic nurses, which are to identify barriers to quality education for Hispanic nursing students and to recommend appropriate solutions to state, local, and federal agencies. The NAHN (2014) plans to promote the recruitment and retention of Hispanic students in nursing education programs, in order to increase the number of bilingual and bicultural nurses who may provide culturally sensitive nursing care to Hispanic consumers.

The nursing profession consists of registered nurses from a variety of ethnic backgrounds, and patients in the health care system are also very diverse. However, these two groups, nurses and patients, are not equal in the diversity mix. Nursing program administrators need to focus on increasing the diversity of nursing students at their institutions of higher learning. Diaz-Martinez and Duncan (2009) state, in regards to developing multicultural competence, “as teachers, professors, and supervisors, we have the responsibility for educating the next generation of professionals” (p. 342). However, in order to assist in increasing the awareness of students of cultural diversity, schools must ensure their community of students on campus is diverse.
Purpose Statement

The purpose of this research study is to investigate how recruitment is being implemented to obtain Hispanic students in associate degree nursing programs, and what support services are being provided to retain these students. The most efficient way to discover how this is being done is by having a study that samples nursing program administrators and Hispanic nursing students. Research questions were developed to discover strategies for recruitment and retention that could be adapted by other nursing schools. A comparison of the two samples also indicates areas that need improvement.

Research Questions

Based on the above information, research questions were developed. The overarching research questions that were developed are the following.

1) What strategies do nursing school administrators use to attract and recruit Hispanic students?

2) How do nursing school administrators and students perceive the success of their processes to obtain applicants?

3) How are Hispanic nursing students attracted to associate degree schools of nursing?

4) What obstacles, barriers and challenges do nursing students experience, according to the nursing school administrators and the Hispanic students?

5) What support services are perceived by Hispanic students as being effective or in-effective?
Operational Definitions of Terms

It is important to understand the following defined terms when reading this research.

**Associate Degree Nursing Programs.** A two-year degree program with a major in nursing. Graduates are prepared to take the National Council Licensing Examination for registered nurses, NCLEX-RN (NLN, 2013).

**Barrier.** Something that impedes or separates one (Merriam-Webster, 2014). Anything which makes it difficult for someone to do something, such as succeed in college or become a student.

**Challenge.** Something by its nature or character serves as a call for special effort to meet a goal, such as graduate from college (Dictionary.com, 2015a).

**Cultural Competence.** A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations (Office of Minority Health, 2002).

**Hispanic.** A person of the Hispanic ethnic group has origins in one of the following countries: “México, Central America (Guatemala, Honduras, Costa Rica, El Salvador, Nicaragua, and Panama), the Spanish-speaking countries of South America (Colombia, Venezuela, Perú, Chile, Ecuador, Uruguay, Paraguay, and Argentina), the Spanish-speaking countries of the Caribbean (Cuba and the Dominican Republic), and/or the U.S. territorial island of Puerto Rico. Many Hispanics have European, indigenous, and African racial origins” (Delgado-Romero & Hernandez, 2002, p. 146).

**Latino.** The Office of Management and Budget (OMB) defines Hispanic or Latino as “a person of Cuban, Mexican, Puerto Rican, South or Central American, or
other Spanish culture or origin, regardless of race” (CDC, 2014).

**Mentoring.** A relationship where an experienced individual provides task coaching, emotional encouragement, information, feedback, availability and acceptance to a less experienced individual (Northouse, 2011).

**Nursing Program Administrators.** The department head of the nursing program at a community college that offers an associate’s degree in nursing and who holds a master’s degree in nursing (NLN, 2013).

**Obstacle.** A phenomenon that obstructs or hinders progress (Dictionary.com, 2015b).

**Registered Nurse (RN).** A person licensed to practice nursing in the United States. To become a registered nurse one must pass a national examination, NCLEX-RN (NLN, 2013).

**Student Recruitment.** The process of identifying and encouraging one to attend a particular college or university (Dictionary.com, 2015c).

**Support Services.** This term describes those services and activities offered to students at a college or school of nursing that may include tutoring, remediation, academic support, study groups, etc. (Great Schools Partnership, 2014).

**Student Retention.** This term describes students who persist in and graduate from their original nursing programs (National Center for Educational Statistics [NCES], 2015).

**Student Persistence.** This term refers to students who continue their existence in a college or nursing program, but at a different school (NCES, 2015).
Significance and Potential Contribution of the Study

Practice/Education. The findings of this study can assist nursing program administrators to learn a) strategies in the area of recruitment and retention of Hispanic nursing students, and b) retention interventions that may increase the likelihood of more Hispanic nursing students graduating and passing the national licensure examination. An increase in Hispanic registered nurses will assist in the availability of more culturally competent care for patients.

Future research. The results of this study are just one opportunity to discover the recruitment and retention practices of associate degree nursing programs. Why is the Hispanic student less likely to apply to nursing school than a student that is non-Hispanic? What types of personal persistence assists the Hispanic student to graduate? There are several possible future research studies that can be a sequel to this research study.

Organizational policy. College scholarships from educational institutions or corporations in geographic areas with a high concentration of Hispanic patients can provide financial incentives for students. This will keep the students in their hometown upon graduation and thus able to help the local Hispanic population. Health care institutions and coalitions can employ potential Hispanic nursing students as assistants or aides to allow them to learn about health care and thus encourage them to join the nursing profession.

Assumptions and Limitations

A limitation of this study is that it was only conducted with associate degree nursing programs in one Mid-Atlantic state of the United States. Therefore, the
conclusions of the study may not be generalized to Hispanic students or nursing program administrators at other nursing programs throughout the United States. Only associate degree nursing programs were researched, thus eliminating bachelor and diploma schools of nursing. Despite numerous attempts, the number of participants was limited due to a lack of being able to conduct research on other community college campuses.

Assumptions of this study include that the students may have been concerned that their responses on the student survey and focus questions might be relayed to their college instructors, which would decrease those willing to participate. It was also assumed that students might be emotionally marginalized on their campuses and that stereotypes of the Hispanics might be impinging on their education. Another assumption was that possibly the Hispanic students would not want to be interviewed by a non-Hispanic person who does not understand their culture. They would possibly either be intimidated by the interviewer or would not openly share information. It was assumed that the nursing program administrators would complete the electronic survey in a timely fashion; however, they had to receive numerous reminders to complete the survey. The survey was posted at the end of the semester so many of them were busy with final exams and graduations.

**Conclusion**

Hispanics have had challenges in the higher education arena. They have had many obstacles, barriers, and challenges throughout American history. The national focus on increasing the education of the Hispanic population will increase the challenges of higher education to recruit and retain these students. The increase of the Hispanic population will challenge the health care system. There is a definite need for more Hispanic nurses,
and a need for the educational arena to increase the number of Hispanic students in their nursing programs. Educators and health care professionals will need to collaborate to assist in increasing the pipeline of Hispanic nursing students; however, there are many variables that can affect increasing the number of Hispanic nursing students, which are discussed in the following literature review. Variables that can affect these changes are discussed in order to justify the development of the research questions, research design, and data collection.
Chapter II

Literature Review

The challenge to increase the number of Hispanic nursing students in higher education and thus to increase the amount of culturally-competent registered nurses in the workforce pipeline has promoted a variety of scholarly activity to discover how to accomplish these goals. The objective of this chapter is to describe the past history of Hispanics in higher education and what their status is in today’s educational institutions. Theoretical frameworks are discussed that may enlighten the educator about student development theories that can impact the student’s learning on or off campus along with obstacles, barriers, and challenges that may occur in their studies.

History of Hispanics and Legislation in Higher Education

An analysis of the history of Hispanics in higher education illuminates the many challenges they have faced. Historical analysis is an important technique to trace events in history that had a significant impact on past, current, and future trends. “Historical analysis is an integral component of the study of history. Specifically, it entails interpretation and understanding of various historical events, documents and processes” (Wesleyan University, 2011, para. 1). This type of analysis can answer questions about whether historical events had an impact on specific members of the population or it can elicit future plans to help members of a population (Wesleyan University, 2011).

Various historical factors have affected the Hispanic population in America, specifically in higher education. They have struggled over the years in their pursuit to attain access to higher education. Due to the demographic changes in the American
population, Hispanics cannot be ignored, and many initiatives have been developed to assist them in their quest for higher education.

It was the Mexican American War of 1846 and the Treaty of Guadalupe Hidalgo that gave Mexican Nationals the rite of passage to live in the territory conquered by the United States and thus allowing them to become U.S. citizens (Lucero & Poghosyan, 2012). Unfortunately, these Mexican-Americans, also referred to as Hispanics, became marginalized and the U.S. government did not assist them in assimilating with others. Schooling was put under the control of the U.S. government agencies which did not allow them access to education (Cuadraz, 2005; Lucero & Poghosyan, 2012).

In 1944, thousands of Mexican-American veterans had the opportunity to attend college under the GI Bill; however, a language barrier existed because the schools were not designed to provide bilingual, bicultural curricula (Lucero & Poghosyan, 2012). Civil rights movements for Chicano-Americans, also referred to as Hispanics, and Mexican-Americans advocated for bilingual bicultural training for teachers, and the removal of racist teachers and administrators (Lucero & Poghosyan, 2012).

In 1990, George H. W. Bush established the White House Initiative on Educational Excellence for Hispanic-Americans to address the educational disparities faced by the Hispanic community, and it was renewed by President Clinton, President George Bush, and President Obama (United States Department of Education, 2013). Institutions that applied for Title V federal grants have to prove that a minimum of 50 percent of their Hispanic students fall below the United States Census’s poverty level restrictions and provide a five year plan for improving assistance to the Hispanic students is also required (Hurtado & Ruiz, 2012).
In 1994, President Clinton signed the Presidential Advisory Commission on Educational Excellence for Hispanic-Americans, which was to improve education for Hispanic-Americans (United States Department of Education, 2013). The Commission was dissolved in 2003, and was then called the Partnership for Hispanic Family Learning (United States Department of Education, 2013). In 1998, President Clinton and Vice-President Gore created the Hispanic Education Action Plan (HEAP) to invest more in programs for Hispanic students in Head Start access, English language learners (ELL), GEAR-UP college prep programs, and increased support of HSIs (President’s Advisory Commission on Educational Excellence for Hispanic Americans, 2000). In 2010, the National Education Summit and Call to Action was a forum of leaders to share expertise, and to share resources to expand educational opportunities for the Hispanic students (St. John, Daun-Barnett, & Moronski-Chapman, 2013).

**Hispanic-Serving Institutions**

Various higher education institutions were founded that would attract Hispanic students to higher education. Affirmative action occurred in the 1960s while HSIs were established under the Higher Education Act of 1965 and the Hispanic faculty rose 71 percent (Cohen & Kisker, 2010).

According to Hurtado and Ruiz (2012), the four institutions founded in the 1960s and early 1970s established to purposefully educate Hispanics are Hostos Community College and Boricua College, both in New York, National Hispanic University (California) and St. Augustine (Illinois). There currently are 356 HSIs (Soliz & Santiago, 2012) that meet the federal requirement, which was previously discussed, compared to 135 in 1996, and their campuses are in 12 states and Puerto Rico (Griffin & Hurtado,
The majority (68%) of HSIs are public, and 51 percent of the HSIs are two-year institutions (Griffin & Hurtado, 2011).

The Hispanic Association of Colleges and Universities (HACU) that was founded in 1986 is an advocate to assist HSIs to obtain funding from the federal government, and thus to increase Hispanic student access and graduation rates (Laden, 2004). The challenge is how do the colleges and universities recruit Hispanic students. It is apparent that the Hispanic student has been the recipient of negative as well as positive perceptions in the higher education arena. If it were not for the Civil Rights movement and the Higher Education Act, Hispanics may not have been a part of social and educational equity. Hispanics were present more in the higher education arena after the civil rights movement, and their enrollment increased more often when they became an identified minority group. Over time they have gained more access to higher education through various educational initiatives. Their increased college enrollment was assisted by all of the various laws, previously mentioned, that were enacted. The prior history of Hispanics being omitted from higher education may have had some influence on the sparsity of Hispanics entering colleges or nursing programs.

**Student Development Theories**

Student development theories can relate to the Hispanic student, and these theories need to be known by educators, in order to provide the best possible education for these students. “The more dissonance there is between the environments in which Hispanics (Latinos) grew up and the college environment, the more likely cultural conflicts will play a role in their self-identification” (Torres, 2011, p. 195). Therefore educators and administrators who are not familiar with the Hispanic culture, or who have
little experience with this culture need to be educated. Seeking advice from experienced colleagues would be helpful for these educators. The following student development theories were used as the conceptual framework for this research study.

**Schlossberg’s foundational theory.** Various theories of student development help to identify reasons that may affect Hispanic students’ success in college. Schlossberg’s (1989) foundational theory of marginality and mattering explains why students who are involved on campus are more successful because they feel they belong and they matter. Marginality is when a particular transition or change occurs in one’s life, such as going to college, while mattering helps a student feel connected to others (Schlossberg, 1989). Schlossberg’s five ways of mattering include: attention, importance, ego-extension, dependence, and appreciation (Evans, Forney, Guido, Patton, & Renn, 2010). These five ways of mattering are further defined by Evans et al. (2010) as: 1) attention refers to “the feeling that one is noticed,” 2) importance is “a belief that one is cared about,” 3) Ego-extension is “feeling that another person feels proud of one’s successes,” 4) dependence is “a feeling of being needed by others,” and 5) appreciation is “feeling that one’s efforts are appreciated” (p. 9). This theory may be used to assist faculty, college peers, or organizations to assist Hispanic students in their college experiences so they are successful in graduating.

**Torres’ Hispanic identity development theory.** Torres’ theory correlates how the majority can influence how a minority is seen and valued, which can include historical biases that promote tension among the two groups and thus oppressing the identities of the minorities (Torres, Jones, & Renn, 2009). An historical analysis was done by Torres to educate others about the oppression of the Hispanic/Latino person in
education. Torres performed a longitudinal study, that supported her first study of Hispanic Identify Development Theory, which highlighted “how the influences of where they grew up, generational status, and self-perception of societal status played a role in situating the identity of the Latino college students, and how these students perceived their culture and environment” (Levine, 2010, para. 4).

It is important that Latino/a students can clarify their own identity from racial and ethnic perspectives. According to Torres (2003):

[The] Latino/a student racial identity development model allows students to gain that clarity via the following orientations: (a) bicultural orientation--comfort level with both cultures, (b) Latino/Hispanic orientation--greater comfort with culture of origin, (c) Anglo orientation--greater comfort with majority culture, (d) marginal orientation--discomfort with both cultures that may indicate internal conflict, and (e) acculturation--choices made about the majority culture versus ethnic identity maintenance of culture of origin. (pp. 533-534)

These theories may be used by higher education personnel to better understand recruitment and retention of Hispanic students and what supports can be offered to curtail this problem. The research protocols that were used in this study used many of the concepts of these theories to mold the various survey and focus group questions.

**Psychological Challenges, Obstacles, and Barriers**

There are various psychological challenges, obstacles, and barriers that affect Hispanic students in entering college and persisting in their education. One of the most significant barriers faced by Hispanic students is their family. Kenechukwu, Newman, Kramer, and Pearson (2009) believe that cultural norms often create a conflict in the Hispanic students’ engagement in college. Hispanic students often stay near their homes and care for family members because of their cultural norm of familism. This term refers to “core values of a family type which emphasizes commitment to the family as a unit”
(Sociology Index, 2015). If there are no HSIs near them to commute, they are pointed toward non-HSIs for their education, which may cause a lack of engagement that decreases their success in college. This lack of engagement is due to not feeling like they fit into the campus culture.

Being the first generation to attend college leads the Hispanic student to have many challenges, such as, guidance from their parents or siblings that have not attended college, a lack of social capital that prevents them from applying for financial aid, and the inability to have peers on campus. All of these challenges can cause the Hispanic student to quit because he/she does not have enough financial resources, motivation, or energy to persist in educational endeavors without adequate emotional support (Page, 2013).

Family barriers need to be addressed in order to prepare the Hispanic student for early childhood education and thus increase their long term knowledge. Hispanic families are not enrolling their younger children in pre-school programs, so the long term benefits of early childhood education are not being offered to these potential aspiring college students (Lucero & Poghosyan, 2012). Educators can provide education workshops for parents and families. These could be offered by early childhood education majors at local colleges.

The President’s Advisory Commission (2000) recommends that 1) Hispanic college freshmen receive study skills training, 2) colleges expand their college admission recruitment of Hispanics, 3) parents be educated about college education, 4) Spanish recruitment material be provided to students, 5) the diversity of faculty be increased, 6) more research studies be conducted to investigate why Hispanics drop out of college, and
7) there be improvement for the Hispanics transitioning from a two-year college to a four-year college (President’s Advisory Commission, 2000).

Nursing literature presents various research that has focused on Hispanic nursing students. Hispanic students, whether in a nursing program or other educational program, have many reasons why they do not continue in their college careers. These reasons include, but are not limited to, school personnel having low expectations of them, negative school experiences, stressful situations, educationally disadvantaged, financial difficulties, poor family support or high family responsibilities, isolation and loneliness, university discomfort, self-beliefs, lack of technological competence, etc. (Cavazos et al., 2010; Gilchrist & Rector, 2007; Gloria, Castellanos, Lopez, & Rosales, 2005; Loftin, Newman, Dumas, Gilden, & Bond, 2012).

“The lack of minority nurses directly influences the profession, the education of future professionals, and the future of quality health care” (Dowell, 1996, p.293). In her research, Dowell (1996) identifies many issues that have contributed to fewer minority students on campus: stringent admission policies, attitudes of faculty and administrative committees, as well as racial biases. The literature supports other research that it is common for Hispanic nursing students to make statements about their feelings of being different and isolated from their White peers (Noone, 2008). Frequently, Hispanic nursing students lack confidence in expressing themselves in a group and asking for help from their faculty (Noone, 2008). As the student population becomes more diverse, faculty must make changes in how they approach teaching and learning for these students (White, 2003).

Cognitive and non-cognitive factors have been researched as possible barriers to
the Hispanic nursing students’ success. Cognitive factors, such as grade point average, diagnostic testing, and critical thinking skills have been researched to predict nursing student success. Non-cognitive factors, such as stress and social support are not researched as often. Mayville and Huerta (1997) discovered that “qualitative data elicited from both studies demonstrated that nursing students experienced increasing pressures and many stressful life changes that impacted their chances of academic success” (Mayville & Huerta, 1997, p. 24).

**Academic Barriers**

“Institutional barriers to student success may include racial prejudice, faculty attitudes, and inadequacies of meeting the learning needs of the culturally diverse students, and a lack of support services” (Gilchrist & Rector, 2007, p. 282). A lack of academic support can be derived from nursing faculty or pre-college teachers who do not understand the cultural and academic needs of the Hispanic student (Doutrich et al., 2005).

Barbatis (2010) studied ethnically diverse community college students and the factors that contributed to their persistence in completing college. The researcher found that high faculty-student interaction, opportunity for involvement, mentoring, leadership, cultural, and campus support resources were key factors in student persistence (Barbatis, 2010).

There is a concern of equality in the testing of Hispanic students. The testing environment of America has been basically for the “monolingual and monocultural citizens” (White House Initiative on Educational Excellence for Hispanic Americans, 2000, p. 5). This possible inequality has created challenges to the Hispanic population,
who often have a variety of linguistic backgrounds because they are from Cuba, Puerto Rico, Mexico, the Caribbean, and Latin America (White House Initiative on Educational Excellence for Hispanic Americans, 2000). The concern is whether their test scores are impacted because of their culture or bilingual background. Research has not been fully implemented to study cultural differences on test scores. According to the President’s Advisory Commission on Educational Excellence in Americans (White House Initiative, 2000), achievement tests show a chronic underachievement for Hispanic students.

Noone (2008) states that although ethnically diverse students may have excellent SAT scores, they often have more financial and educational disadvantages that place them at a disadvantage to being accepted into nursing school. It is important for the school’s strategic plan to incorporate social justice issues and diversity. There are various factors that Hispanic students must overcome personally and academically. Cavazos et al. (2010) interviewed 11 Hispanic students about their coping responses to challenges in school. The responses identified by the participants included: “...positive reframing, acceptance, self-talk, maintaining focus on final goals, using low expectations as motivation, self-reflection, taking action and seeking support” (Cavazos et al., p. 304). Hispanic students are not necessarily being given encouragement and guidance by college teachers. A premed Hispanic female student was having difficulty with calculus so she asked for help from one of her professors. She was told she would not achieve what she wanted in her career, not because she was female, but because she was Hispanic, to which the students stated it “added fuel to the fire” (Cavazos et al., 2010, p. 310) and that made her more motivated. Academic barriers have been identified by various researchers, which include the students having difficulty with communication and
feeling uncomfortable expressing themselves in front of a group, which are common expectations that faculty have of all (Amaro, Abriam-Yago, & Yoder, 2006).

**Faculty Attitudes**

Griggs and Dunn (2006) state that “educators need to be aware of self-image problems of Hispanic-American students that may result from a rejection of their ethnicity and from attempts to conform to the larger Anglo culture” (para. 7) According to Doutrich et al. (2005), there has been a lack of cultural competence in the faculty in many disciplines, and many faculty do not have the skills to respond to a culturally sensitive situation in a supportive manner. Professional development of nursing faculty must be emphasized, and faculty need to have workshops designed to help them handle classroom issues that might relate to racism and culture (Doutrich et al., 2005).

Barbee and Gibson (2001) believe that faculty need to understand that racism is present in nursing programs, and they should stop assuming non-White students are intellectually inferior and all come from poor educational backgrounds. Institutional support should be available and recruitment must be enhanced to ensure a future of professionals from the Hispanic population (Barbee & Gibson, 2001). Griffin and Hurtado (2011) strongly suggest there must be an environment with sensitive support staff and peer support to assist the Hispanic student to adjust to college life and to be successful.

**Community Colleges**

Associate degree nursing programs are the choice of 55% of Hispanics, and 39% of Hispanics chose a bachelors degree nursing program, while 5.5% choose a diploma nursing program, as their initial nursing education. Hispanic students have the highest
percentage of associate degree program entrants compared to Whites, African Americans, and Asian (HRSA, 2010). Community colleges were chosen as the context for the participating sample in this research study because most Hispanic students enter this type of nursing program.

Berta Laden, an HSI educational scholar, increased educator’s knowledge of HSIs by stating that community colleges are often called the “second-chance institutions” because most students who attend these types of colleges had no other choice (Hagedorn, 2007, p. 149). According to Hagedorn (2007), students attending community college are already starting off with handicaps, such as, language barriers, supporting themselves and others, or coming from low income areas, etc. Even though the community colleges are present in the community, there is still a lack of Hispanic nursing students compared to Hispanic non-nursing students. In one HSI community college with a 44% Hispanic enrollment, only 33% are in the pre-nursing program, which is a little over one third of the students with this major, and only 15% of the students who do graduate from the registered nurse program are Hispanic (New Jersey City University, 2010)

**Recruitment of Hispanic Nursing Students**

The research literature has a wealth of interventions that have been explored and developed to recruit the Hispanic nursing student. However there are many challenges when recruiting these students which are discussed in this section. Many universities have used posters to depict diverse students who attend their educational setting or designed brochures portraying a diverse population (Noone, 2008). Recruitment efforts also include summer camps to allow prospective students to learn more about nursing, or for students who are able to take college level courses in high school. Faculty visit local
schools to encourage Hispanic students’ interest in the nursing school while other schools have pre-entry programs to assist with developmental courses in communication, critical thinking, and study skills (Noone, 2008).

Chacon, Cohen, and Strover (1986) found financial concerns for Hispanic students included debt incurred by loans, lack of money for bills and personal expenses, hours spent on outside employment, and uncertainty of receiving financial aid. These financial concerns have continued through history as the Hispanic population had the highest episodic poverty rate for 36 months in the United States. A “lack of educational achievement and endemic poverty within the Hispanic/Latino population are factors that reinforce each other” (Taxis, 2002, p. 253). However the median income for Latinos rose 3.5% to $40,963, and it was the first annual increase since 2000. The number of Latinos in poverty fell to 12.7 million from 13.6 million (Puzzanghera, 2014). Therefore, the Hispanic student is already financially challenged to pay for college based on his/her poverty status.

Recruitment efforts are on the rise in all areas of higher education due to the rise in the Hispanic population. The onset of the recession of 2008 has increased the Hispanic population of high school graduates that immediately enter higher education from 49% in 2000 to 69% in 2012 with the economic projection that a college degree will help with employment opportunities and help with a tight job market (Fry & Taylor, 2013; Valbrun, 2014). College administrators and recruiters are holding workshops for prospective students and families and especially for “first generation students” (Valbrun, 2014, p. 6).
Various themes of recruitment barriers for the Hispanic students are identified in the literature. These themes include a lack of financial support from family or loans/scholarships, having to work many hours in a week during school, lack of emotional and moral support from family members and living arrangements, transportation, child care, gender stereotypes, and lack of technical equipment (Bond et al., 2008). Gilchrist and Rector (2007) emphasize that

[Information or advice from a practicing nurse is the most positive factor in influencing a student’s decision to become a nurse. Therefore, practicing nurses should be encouraged to positively affect students; what they say to students and how they treat them makes a difference. (p. 278)]

These authors also believe that “nursing programs need to begin to attract ethnically and culturally diverse students into a nursing career starting in elementary school and keep the focus throughout high school” (Gilchrist & Rector, 2007, p. 283).

In Washington State the need for Hispanic nursing students has increased because the population now warrants 2,540 Hispanic health care providers to care for the Hispanic population. A 23-minute recruitment film was developed to attract Hispanic/Latino and American Indian students into a bachelor’s degree in nursing program (Evans, 2003). This film is currently being shown to middle school and high school students.

A Health Resources and Services Administration (HRSA) grant was awarded to Linfield-Good Samaritan School of Nursing in Oregon to increase the population of Hispanic nursing students, which had an enrollment of 2.6 percent Hispanic nursing students (McGraw & Epeneter, 2004). The goal of this Oregon nursing school is to increase the Hispanic student population to eight percent by the end of the third and final project year (McGraw & Epeneter, 2004). The HRSA grant at Linfield-Good Samaritan School of Nursing in Oregon was so successful it was renewed in 2006 and will include
resources to improve the students’ academic skills (Linfield Magazine, 2007). Oregon Health Sciences and University (OHSU) received a HRSA grant as well because of the state’s poor ratio of Latino nurses to the Latino population (3.6 percent nurses to 12 percent population), the grant hopes to boost enrollment and support for students of Latino/Hispanic origin (OSHU, 2013).

Barriers to recruitment of Hispanic students were studied by Villarruel et al. (2001) in which focus groups of Hispanic RNs were conducted throughout the country to decipher the bridges and barriers these RNs had while attending their nursing education programs. The barriers for Hispanic RNs identified were: financial, discrimination by peers and faculty, gender roles within their own culture—that they should be home with the family, limited family support, and speech accents or English as a second language. In this same study, bridges were identified which were positive items about their nursing education including institutional support, flexible class times, financial aid, role models, mentors, aspirations of a career, and job security (Villarruel et al., 2001).

Doutrich et al. (2005) also explored practicing Hispanic nurses’ educational experiences using a phenomenology design study, and the findings were also consistent with other literature. Findings included: little family support, difficulty leaving home because of role expectations, first to attend college, financial, being singled out as a Hispanic, social isolation, less comfort with self-disclosure, ineffective high school advisement, lack of preparation for college work, being directed to menial labor jobs, and a lack of cultural sensitivity during the recruitment process by the school personnel (Doutrich et al., 2005). This study is significant because many of the findings by
Doutrich et al. (2005) are still apparent with current Hispanic nursing students’ experiences, and thus how much has been accomplished since this study was conducted.

Jones-Torres and McDevitt (1995) identified that many Hispanic students were often nurses’ aides or medical assistant because they either had little confidence in their abilities or their academic background. However, often it was because high school counselors did not advise them to take the correct pre-requisites for college and steered them to paraprofessional positions. The Latino Nurses Project in the Philadelphia, Pennsylvania area was funded by the Independence Foundation and it served students at Gwynedd-Mercy College and nine other institutions in the Philadelphia region, solely for the purpose of recruiting Hispanic students from the public and private secondary schools as well as adults via outreach programs (Jones-Torres & McDevitt 1995). A tutoring center was then set up in the local Roman Catholic parish to assist with further tutoring, counseling mentorship, tuition assistance, and other valuable support services (Jones-Torres & McDevitt 1995).

A descriptive study with guidance counselors as participants revealed Hispanic counselors rated caring and professional leadership skills higher than did White non-Hispanic counselors (Robbins & Hoke, 2010). Because White non-Hispanic guidance counselors placed a lower value on registered nurse attributes of leadership/professional skills and caring, they may limit their recommendations that nursing is a career choice, thus interfering with the pipeline of new Hispanic nursing students who have those characteristics (Robbins & Hoke, 2010).

Nursing schools are recruiting more Hispanic students by outreach programs. Grants have been established by the Health Resources and Services Administration
(HRSA) in various colleges, that include: Virginia Commonwealth (VCU) developed a *Weekend Warrior* program; the University of Texas at El Paso developed a retention and recruitment nursing student program; and a STARS (Stimulating-Tutoring-Assisting-Recruiting-Strengthening) program was developed at the University of Texas at Arlington (Marquand, 2014).

Cason et al. (2008) researched perceived barriers and needed support concerns with seasoned Hispanic health care professionals who felt that

> [P]arents are the key players in a student’s decision to go to college. Working with students and their families while students are still in junior high school to help them understand what it means to go to college to seek a career in the health care workforce is crucial to successful recruitment. (p. 48)

Pre-college recruitment should begin in the middle and high school levels (AACN, 2011). Coffman et al. (2001) state that Hispanics/Latinos who have not had a strong background in mathematics or science courses in high school may not pursue a nursing degree or may be prohibited from entering a nursing program because of not being academically prepared for that major. Nursing schools should reach out to the local K-12 schools and introduce their nursing offerings to expose Hispanic students to the nursing profession early on (Coffman et al., 2001).

**Retention of Hispanic Nursing Students**

Recruitment of Hispanic nursing students is a challenge but an even bigger challenge is retaining them in college to graduate. Hispanics who enter nursing programs have an attrition rate from 15% to 85% (Dowell, 1996). The American Association of Colleges of Nursing (2011) identify mentoring as a key component in retaining nursing students, of all ethnic backgrounds. A college in Ohio provides one-on-one attention to minority students throughout their entire nursing program (AACN, 2011). Loma Linda
University in California offers programs to increase retention, such as study skills, critical thinking, nursing math, medical terminology, reading comprehension, and writing in nursing (AACN, 2011). The Loma Linda program has had a 94% retention rate of minority students and each of the students has an academic advisor who has a similar ethnic background as the student (AACN, 2011).

Role models and mentoring for Hispanic students are very effective (Garcia, 2008; Taxis, 2002). Hispanic participants in a research study done by Cason et al. (2008) “viewed presence of role models as a major factor in Hispanic students’ academic success in the health professions” (p. 46). However, because there is a lack of Hispanic role models in the nursing education/faculty arena, organized mentoring programs have been developed to support students that are coordinated by students (Cason et al., 2008).

Technical support has also been identified in the nursing literature as a retention effort done by many colleges (Cason et al., 2008; Gardner, 2005). Many minority students lack basic skills in writing, communicating, analyzing, and synthesizing information (Dowell, 1996). Colleges need to provide these support services to the Hispanic students to help them be successful and thus retain them in their programs.

Summary of the Literature Review

In summary, there are many variables that may affect the Hispanic nursing student, from recruitment to retention. Although the literature presents many interventions that have been done to assist in recruitment and retention, the literature reviewed identifies some gaps in the prior research. Much of the research that has been carried out is in the South and Pacific Coast regions of the United States. There is a larger percent of Hispanics in the South and Pacific Coast regions. Because those regions are
more densely populated by Hispanics, the research in those areas has been more abundant. The participants of this research study are from the Mid-Atlantic region. This research study will assist in discovering practices of one Mid-Atlantic state where the Hispanic population is growing. There are many research studies regarding Hispanic nursing students, but few that had community college participants or participants from the Mid-Atlantic region.

The growth in the Hispanic population will challenge health care professionals to have the necessary knowledge to ensure culturally competent care for the Hispanic population. Higher education has the challenge of recruiting and retaining more Hispanic students who will be the future professionals ensuring this challenge is met. Schools of nursing will have the responsibility to educate future Hispanic professionals. There are challenges for nurse educators to provide academic support, provide a learning environment, and implement teaching strategies that will enhance their success.
Chapter III

Methodology

This chapter will review the purpose statement and research questions. A discussion follows on how and why the research design was chosen. My worldview and beliefs are also included as they serve as the catalyst for the spirit of inquiry of the research topic. The section that follows will discuss the chosen participant sample, the data instruments, data collection, and data analysis. Ethical considerations of the study and trustworthiness are discussed later in this chapter.

Purpose Statement

The purpose of this study was to determine how nursing program administrators recruit Hispanic students to their institutions, what support services the institutions offer the Hispanic students to assist in retention, and what the institutions identify as the challenges, obstacles, and barriers for the Hispanic students. Research in this study also explored perceptions of the Hispanic students about the nursing programs that recruited them, what support services were effective or not effective, and what they saw as the challenges, obstacles, and barriers for their success or lack of success. A comparison of data from both groups (i.e., the Hispanic students and the nursing program administrators) was done to analyze the perspectives of both groups of participants regarding recruitment and retention practices at associate degree nursing programs.

Research Questions

The overarching research questions that were developed are the following.

1) What strategies do nursing school administrators use to attract and recruit Hispanic students?
2) How do nursing school administrators and students perceive the success of their processes to obtain applicants?

3) How are Hispanic nursing students attracted to associate degree schools of nursing?

4) What obstacles, barriers, and challenges do nursing students experience, according to the nursing school administrators and the Hispanic students?

5) What support services are perceived by Hispanic students as being effective or non-effective?

**Research Design**

This research study began as a mixed methods explanatory sequential design. However, due to the length of time it took to receive data from phase one, and the IRB approvals for phase two, the data were collected simultaneously, thus the study became a convergent mixed methods research design. Convergent mixed methods, also known as concurrent design (Castro, Kellison, Boyd, & Kopak, 2010), is when quantitative and qualitative data are collected during the same stage; however, priority may be given to one form of the data over another. In this study, the qualitative data were given priority. The qualitative data were given priority because they were obtained from the Hispanic nursing students who are the sample that will be benefit the most from the data findings. Interviewing the Hispanic students reassured them there are advocates for their educational success, and it will help promote social change by decreasing health care disparities by having more Hispanic registered nurses. “The purpose of concurrent triangulation designs is to use both qualitative and quantitative data to more accurately
define relationships among variables of interest” (Castro et al., 2010, p. 344). Concurrent transformative designs are “theoretically driven to initiate social change or advocacy” (Castro et al., 2010, p. 344).

In the literature review, two student development theories, Schlossberg (1989) and Torres (Torres et al., 2009), were introduced as the conceptual framework for this study to possibly determine if the Hispanic nursing students’ recruitment and retention was affected by others in their environment. Therefore, these two student development theories guided some of the questions on the research protocols. I felt it was important to identify if the Hispanic students perceived that they were stereotyped on campus and whether they engaged with other non-Hispanic students on campus. This would be beneficial feedback from the students because it would identify if the students were experiencing marginality or a transition to college, and if mattering was present to assist them in feeling connected to others (Schlossberg, 1989). Torres’ theory would assist to decipher if the Hispanic student’s felt any tension or oppression from the non-Hispanic students on campus as the minority on campus (Torres et al., 2009).

A mixed method design was chosen to enhance the collection of the participants’ perceptions by a variety of data collection methods. Choosing this method allows the researcher to form groups based on the quantitative results as well as conduct qualitative research with the participants or to use quantitative results about particular characteristics to guide purposeful sampling for qualitative data (Creswell & Plano Clark, 2011; Teddie & Tashakkori, 2009). “Mixed methods can improve the quality of instruments used for data collection” (Mertens, 2010, p. 5). The results of this research design identified the recruitment and retention practices in institutions of a Mid-
Atlantic state based on the perceptions from seven nursing program administrators and 15 Hispanic nursing students.

Rich data from mixed methods allows for more integrated analysis and the data analysis involves an “iterative process of constantly moving back and forth by revisiting both qualitative and quantitative data” (Jang, McDougall, Pollon, Herbert, & Russell, 2008, p. 244). Thus rich data will integrate the perceptions of the nursing program administrators and the Hispanic nursing students.

**My Worldview as a Researcher**

It is important to discuss why I decided to do this research, especially as a non-Hispanic White person. I grew up in a rural country setting in a Mid-Atlantic state where there were few Hispanics or people of other color, besides White. I read a lot about racial prejudice and was against such discrimination. I won an award as a senior in high school where I wrote about Martin Luther King, Jr. and his fight for civil rights, and for racial and religious justice for all mankind. I remember hearing about the riots in the 1960s and my parents discussing them with me as the riots were not far from where I was born. It has always been in my soul that everyone should be treated equally.

I became interested in this research topic when I realized that at the school of nursing where I am employed there was a lack of Hispanic students. This school is located in a city that has a 46% Hispanic population. I started to wonder why students were not coming to this school of nursing. I needed to learn what were the best practices that other schools were offering to attract Hispanic students and how were they retaining them. This topic has been my focus when writing various papers throughout my doctoral
program, which has a focus on social justice. Therefore it was even more important for me to research this topic to be able to determine if the Hispanic students were having an equal opportunity to apply and enter the school of nursing where I worked.

My chosen research study was decided based on my transformative, or advocacy/participative worldview (Creswell & Plano Clark, 2011). In this worldview, I believe in equality for all and that each person should have the best chance to succeed. I want to assist the marginalized Hispanic student to be accepted into a nursing program and succeed. My global concern is that less than 3% of the registered nurse population is Hispanic, yet the Hispanic population is increasing. There need to be more Hispanic nurses who understand the culture of Hispanic patients. Kinsler (2010) states, “Our work must also seek to produce change in the real lives of oppressed people everywhere, not just in educators’ attitudes, knowledge, and theories” (p. 187).

Axiology is also inherent to my philosophical worldview (Creswell, 2013) because it involves ethics, morals, and values. There is confluence between my theory and axiology because they both pertain to values, ethics, and helping to make change for the betterment of others. If I can empower these Hispanic students, by being recruited and supported in their academic career, it will hopefully assist them in reaching their goal of becoming a registered nurse.

Therefore, I wanted to “hear” the perceptions of the Hispanic nursing students. The focus groups and the telephone interviews were a way for me to hear their voices and feel their passion of wanting to be a nurse. If I had sent out an electronic survey to them I would not have seen or felt their emotions. This truly was the most satisfying part of the
research study. I wish I could have spoken with them longer and been able to know them better.

I was a participant-observer of the study by obtaining the consents, administering the student surveys, conducting the audiotape in the focus groups or interviews, and keeping a journal of the interactions, verbal and non-verbal. This decreased the chance for differences in data collection by more than one researcher (Craig, 2009). A reflexive journal was kept throughout the study in order for reflexive bracketing to be accomplished, and the researcher’s values were set aside and did not interfere with data collection and analysis. Ahern (1999) states that in reflexive bracketing “a growing body of knowledge is developed that is faithful to the phenomenon, regardless of the idiosyncrasies of researchers” (p. 407). Continuous documentation was carried out throughout the study along with a researcher’s reflexive journal. Miles, Huberman, and Saldana (2014) encourage the use of “devices such as the researchers’ journal, diary, and analytical memos strengthen the study as it goes” (p. 317).

**Sample-Nursing Program Administrators**

This research study focuses on the associate degree nursing programs which are geographically closer for Hispanic students and less costly. The associate degree programs allow the Hispanic students to stay closer to home to assist with their family responsibilities. A homogenous sample was created of nursing program administrators at 15 associate degree nursing programs in a Mid-Atlantic state. This type of sampling method allows the researcher to compare and contrast the data from multiple sources (Teddlie & Tashakkori, 2009). A homogenous sampling involves selecting participants from a particular subgroup to allow for more in-depth study (Kemper, Stringfield, &
Teddlie, 2003; Patton, 2002; Teddlie & Tashakkori, 2009). The nursing program administrators’ names, contact phone numbers, and email addresses were obtained from the Accreditation Commission for Education in Nursing (ACEN) website that lists associates degree nursing programs that prepare students to take the NCLEX-RN licensure exam and “have been found to meet or exceed standards and criteria for educational quality” (ACEN, 2013, para. 1).

There is a large Hispanic population in this Mid-Atlantic state, which will continue to increase, thus the need for the study in this particular state. This Mid-Atlantic state has a Hispanic population of 1,599,000 Hispanics, which is 18% of the state’s population, ranking as the eighth largest Hispanic population in the United States (Pew Hispanic Center, 2011). The increase in the Hispanic population in this Mid-Atlantic state is estimated to be 22.2% by 2020 and 26.7% by 2030 (State of Hillside Department of Labor and Workplace Development, 2010, p. 14). The Hillside Department of Labor and Workforce Development is a fictitious name to protect the identity of the Mid-Atlantic state and the associate degree nursing programs where this research study was conducted. This large Hispanic population reflects the need to have more Hispanic nurses to care for the Hispanic population who understand their culture. Nurses of the same culture as their patients have better patient outcomes when a patient is cared for by one of their own culture (Gilchrist & Rector, 2007; Oomen et al., 1999).

Based on this census population there will be a great need for Hispanic registered nurses to provide culturally competent health care to the Hispanic population. This Mid-Atlantic state was also chosen for the study as it is the same state where the researcher is employed; therefore, the researcher could have a greater impact on promoting change in
recruitment and retention of the Hispanic students through networking with other nursing program administrators in this state. There is a gap in the literature with research studies in this Mid-Atlantic state and Mid-Atlantic region, as more research studies have been conducted in southern and western states where the Hispanic population is larger and more dense.

**Sample-Hispanic Nursing Students**

An email was sent to seven of the 15 ACEN nursing program administrators in the Mid-Atlantic state asking for their support of research being conducted on their campuses (Appendix A). These seven community colleges were chosen because of their geographic locations and the volume of their Hispanic student population. Therefore the data collected would be a mixture of Hispanic Serving Institutions and non-Hispanic Serving Institutions. The nursing program administrators’ support was necessary in order to obtain IRB approval at their college. A difficult challenge was undertaken trying to find community colleges that would allow research to be done at their colleges. Many of the community colleges did not allow external researchers or they did not have IRB boards that were available, or they had no Institutional Review Board, or there was no one available in the IRB office to assist in the process due to the position being vacant. After many hurdles, two nursing program administrators responded that they would sponsor the research on their campuses. The Institutional Review Board was contacted at each of the two community colleges, and the necessary application process was completed. Institutional Review Board approval was obtained from Rowan University (Appendix B).

The IRB approval was received from Southern Community College (SCC,
fictitious name) located in the Mid-Atlantic state, and the second IRB approval was received from Northern Community College (NCC, fictitious name) also located in the same Mid-Atlantic state, but about two hours away from each other. These IRB approvals are not included in the appendix area to maintain confidentiality of the colleges.

A comparison of the SCC and NCC statistics are seen in Table 1.

Table 1

*Comparison of SCC and NCC 2013*

<table>
<thead>
<tr>
<th>Statistic</th>
<th>SCC</th>
<th>NCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designated HSI</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Student Population</td>
<td>3,919</td>
<td>15,882</td>
</tr>
<tr>
<td>White</td>
<td>47.0%</td>
<td>32.6%</td>
</tr>
<tr>
<td>Black</td>
<td>22.3%</td>
<td>5.6%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>27.2%</td>
<td>23.5%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.9%</td>
<td>7.5%</td>
</tr>
<tr>
<td>American Indian</td>
<td>1.2%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Non-Resident Alien</td>
<td>0.3%</td>
<td>7.2%</td>
</tr>
<tr>
<td>Unknown</td>
<td>0.1%</td>
<td>23.5%</td>
</tr>
<tr>
<td>2 year graduation rate</td>
<td>9.5%</td>
<td>4.0%</td>
</tr>
<tr>
<td>3 year graduation rate</td>
<td>20.9%</td>
<td>63.3%</td>
</tr>
<tr>
<td>Faculty White</td>
<td>84.4%</td>
<td>85.7%</td>
</tr>
<tr>
<td>Faculty Black</td>
<td>6.6%</td>
<td>5.9%</td>
</tr>
<tr>
<td>Faculty Hispanic</td>
<td>6.6%</td>
<td>3.4%</td>
</tr>
<tr>
<td>Faculty Asian</td>
<td>2.2%</td>
<td>4.5%</td>
</tr>
<tr>
<td>Faculty American Indian</td>
<td>0%</td>
<td>0.2%</td>
</tr>
</tbody>
</table>

Stratified sampling homogenizes a group and also allows for comparisons of groups, thus the reason for various geographic areas (Fink, 2013). Comparisons of the students’ responses were valuable in order to determine if one institution was more successful in recruitment and retention, whether it was an HSI or non-HSI institution.

The number of participants in the stratified sampling was aimed at 20 total based on Fink
(2013) who states that “20-30 persons will make meaningful statistical comparisons” (p. 83). A total of 15 students completed consents, the student survey, and were interviewed via the telephone or in a focus group. Six SCC students attended the focus group. Four more students from SCC were obtained, to increase the sample size, via snowballing or network sampling. These four students were interviewed on the telephone. Snowballing or network sampling is a “sampling technique that involves using informants or participants to identify additional cases who may be included in the study” (TTeddlie & Tashkkori, 2009, p. 175).

The remaining five students of the total 15 student sample were from the Northern Community College (NCC). Since the students finished their semester the week after the IRB approval was received, the nursing program administrator posted an email on the students learning management system (Appendix C) with the research study recruitment flyer (Appendix D). Students were advised to email the researcher if they were interested in participating in the study. Nine students from NCC inquired about the study, but only five NCC students followed through with the necessary documents and interview.

**Data Collection**

Quantitative and qualitative strategies were used because they allow for a comparison of various data and for triangulation. This was accomplished by obtaining data from two samples; nursing program administrators and Hispanic nursing students. The quantitative data included electronic and paper/pencil surveys that had open and close ended questions. The qualitative data were collected via an electronic survey, paper/pencil survey, focus group, and telephone interviews. Customized surveys are developed in order to “address a specific set of research goals” (Fowler, 1995, p. 78).
Pre-made surveys could not be located in the literature that address the research questions for this study, therefore, a customized survey was developed to be sent via Survey Monkey to the nursing program administrators and a student survey was given to the Hispanic students. The surveys needed to address the perceptions of respondents to reliably report, as the “strength of survey research is asking people about their firsthand experiences: what they have done, their current situations, their feelings and perceptions” (Fowler, 1995, p. 78).

Open and close ended questions were used for two purposes. The open ended questions allow for choice, as the respondents must formulate their own answer, and although they do not require a lot of effort, they can be demanding to the participants (Salant & Dillman, 1994). Rossman and Rallis (2003) agree that the researcher must “think about the impact we might have had on participants” (p. 264). Open ended questions are beneficial as they offer insight and allow the participant to explain their thoughts and feelings better than using a scale (Fink, 2013). Open ended questions assisted the participants to reflect on how the institutions perceived their success and effectiveness in recruiting Hispanic students, providing support to the students, and what they identify as obstacles, barriers, and challenges to the Hispanic students success or non-success.

Closed ended questions, on the other hand, have answer choices provided to the participants and may be in an ordered fashion, such as strongly agree to strongly disagree, or in an unordered format where the participant has to process more information (Salant & Dillman, 1994). The closed ended questions were valuable to obtain statistical
information that did not require much thought by the students or the nursing program administrators.

Morgan (1988) states that focus groups may be used as a “self-contained means of collecting data or as supplement to both quantitative and qualitative data” (p. 10) and they “offer the opportunity to observe a large amount of interaction on a topic in a limited period of time” (p. 15). Because this type of data collection could be done in a brief period of time with the Hispanic students, it was not interfering with their personal time and it allowed them to listen to their peers speaking. It is a less intimidating setting because the students were with others of their own culture.

Telephone interviews have the advantage of being able to explore answers with the participants and the participants do not have to be concerned with others listening to their comments nor their appearance in front of someone (Fink, 2013). Interviewing can also be valuable as it allows the interviewer to develop a rapport with the participant (Seidman, 2006). The technique of telephone interviews may be advantageous in this study since the interviewer is White and the participants were Hispanic. Therefore students may be more open in their perceptions than with the same interviewer in the focus groups. Seidman (2006) states, that “it is especially complex for Whites and African Americans to interview each other, but other interracial or cross-ethnic pairings can also be problematic” (pp. 99-100).

**Instrument & Procedure-Electronic Quantitative Surveys**

Quantitative data collection in this research study consisted of electronic surveys being sent via an electronic invitation to the email address of the 15 ACEN nursing program administrators in the Mid-Atlantic state, via Survey Monkey, from April 11,
2015 to June 16, 2015. Reminders via Survey Monkey were sent to the sample participants on five occasions and then the Survey Monkey link was sent out in an email link invitation to obtain more participants.

A 13-question electronic survey (Appendix E) was developed on Survey-Monkey. Questions were developed to assist in obtaining the nursing program administrators perceptions of recruitment and retention. Ten close-ended questions and three open-ended questions were included in the survey. Table 2 depicts which questions on the survey were correlated to the research questions.

Table 2

*Methods Matrix*

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Data Source-NPA Survey</th>
<th>Data Source-Student Survey</th>
<th>Data Source-Focus Group/Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1 What strategies do nursing program administrators use to attract and recruit Hispanic students?</td>
<td>1, 2, 7, 12</td>
<td>14</td>
<td>10</td>
</tr>
<tr>
<td>#2 How do nursing program administrators and students perceive the success of their processes to obtain applicants?</td>
<td>3</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>#3 How are Hispanic nursing students attracted to associate degree schools of nursing?</td>
<td>1, 2, 7</td>
<td>14</td>
<td>10</td>
</tr>
<tr>
<td>#4 What obstacles, barriers and challenges do nursing students experience, according to the nursing program administrators and the Hispanic students?</td>
<td>5, 6, 11</td>
<td>10</td>
<td>9, 3</td>
</tr>
<tr>
<td>#5 What support services are perceived by Hispanic students as being effective or non-effective?</td>
<td>4, 8, 9, 10, 13</td>
<td>8A, 8, 9, 11, 12, 13</td>
<td>4, 6, 8</td>
</tr>
<tr>
<td>Other questions not linked to a research question. Question 1: were you an ethnic minority in the class; Question 2: percent of Hispanics in classroom; Question 5: engagement with non-Hispanic student’s; Question 7: stereotype attitudes.</td>
<td></td>
<td></td>
<td>1, 2, 5, 7</td>
</tr>
</tbody>
</table>
The electronic survey was developed and pilot tested by three nursing program administrators at a local nursing program in the same Mid-Atlantic state. They were not included in the invitation to complete the survey. Feedback from the pilot testers stated the survey was user-friendly, not lengthy, and not intimidating. Fowler (1995) states that the survey format should have questions and instructions as easy as possible for the respondents to answer. Fink (2013) also agrees that if a survey is pilot tested it can “improve the response rate because it can eliminate severe potential sources of difficulty, such as poorly worded questions” (p. 8). Cronbach’s Alpha was conducted for reliability of the instrument via IBM SPSS 21 with a result of 0.921, which meant that the instrument has internal consistency of the variables, since the coefficient was closer to a 1.0 scale (Creswell & Plano Clark, 2011).

**Instrument & Procedure-Student Survey**

A student survey (Appendix F), in paper/pencil format, was developed to obtain the Hispanic students’ perceptions of recruitment and retention. Students were asked demographic close-ended questions, such as age, semester in college, whether they had a prior college degree, were they born in the United States, what Hispanic origin group did they belong to, and if they were a first generation student. They received Likert-style close-ended questions regarding how they were recruited, what support services they had access to and used, and what the challenges, barriers, and obstacles were that they experienced in their nursing program. The survey asked Likert style questions with response anchors of “frequency” as these depicted the “extent” that the Hispanic student used support services (Vagias, 2006).
Table 2 depicts which questions on the student survey were correlated to the research questions. The student survey was piloted with three Hispanic nursing students who were not in the study sample. There were no issues with the pilot student survey except that one of the ethnic origins was spelled incorrectly.

Six students from the Southern Community College (SCC) completed the student survey after signing an informed consent (Appendix G) for the student survey. The four other SCC students and the six NCC students were emailed the consent forms and the student survey and they returned them via email. One student did not respond to the email. All 15 student surveys were then placed in the appropriate secure envelopes until the data analysis phase.

Instrument & Procedure-Focus Group Qualitative Data

The purpose of the focus group was to obtain the perceptions of the Hispanic students in relation to recruitment and retention. The focus groups allowed for a richer dialogue to occur that could not be accomplished with a paper pencil survey. Patton (1991) states that qualitative data are collected “to learn about the other person’s perspective” (p. 393), and “collect data about student’s experiences in a college-based program” (p. 394), and the researcher can “gain knowledge about how that program looks and feels to them” (p. 394), and their expectations. The focus groups were one hour in length and all participants signed an informed consent (Appendix G) and consent to be audiotaped (Appendix H).

The focus groups in this research study examined exactly what Patton (1991) elaborates on from his perspective. Focus groups allowed the researcher to hear the voices of the participants, but also allowed participants to feel more comfortable being in
a group setting rather than in a one-on-one interview. It was previously mentioned in the literature review that many Hispanic students are shy and lack confidence, thus having them in a focus group decreased any fear they might have to speak openly. Morgan (1988) states that “the hallmark of focus groups is the explicit use of the group interaction to produce data and insights that would be less accessible without the interaction found in a group” (p. 12).

The focus group questions were developed based on the literature review and the research questions. Table 2, as previously mentioned, correlates the focus groups questions with the research questions. There were questions that did not directly relate to a research question. These questions were asked in order to elicit information that would correlate with the student development theories of Torres and Schlossberg. Questions five and seven were to determine the students’ engagement with other non-Hispanic students and if they felt there were any stereotyped attitudes about Hispanic students at their college.

Once the IRB approval was received by the SCC, the nursing program administrator posted the study recruitment flyer (Appendix D) on the students’ learning management system. An appointment was made with SCC’s nursing program administrator to meet with the students and conduct a focus group. As previously noted, the researcher first met the six students in their classroom on the specified date arranged with the SCC nursing program administrator. The nursing program administrator introduced the researcher and then the students were informed by the researcher of the study and its importance to the nursing profession and to health care. Students who met the criteria of identifying as a Hispanic student and who were willing to participate stayed
after class. The students were informed that their confidentiality and identification would not be published or given to their nursing program administrator. Six students signed an audiotape consent form (Appendix H). The students were given the opportunity to ask questions about the consent forms and about the study. These forms were placed in an envelope that was sealed only for the researcher to keep for the length of the study.

The researcher took field notes during the conversation of any visual observations. The opportunity to observe interactions on a specific topic in a short period of time (Morgan, 1988). The classroom setting had long tables, a closed door, and the students sat in various seats in the room, while the researcher sat in the front of the room. The classrooms were appropriately lighted and at a comfortable temperature. Students were allowed to have a pen and paper with them if they wanted to write down some of their thoughts during the focus questions. Students were then asked to voluntarily answer various focus group questions while they were being audio taped (Appendix I). Not all students answered each question. Each participant received a $10.00 WAWA card as an incentive for assisting in the study. After all the focus questions were asked the audiotape was turned off and the students were thanked for participating. The audiotape was kept in a secure area only to be used for data analysis and destroyed at the end of the study.

Procedure-Telephone Interviews

Telephone interviews were conducted with nine Hispanic students, four from SCC and five from NCC. It was difficult to form one focus group with the SCC and NCC students respectively as they were out of college for the summer, lived in various locations, and they all had various work schedules or family responsibilities. It was decided to set up two dates with four appointments, evening and night, that the students
could call the researcher to be interviewed over the telephone with all of the same focus questions. The students responded by email and set up a specific time and date for the telephone interview. No two students were able to be interviewed at the same time due to their personal schedules. Each of these students was mailed a $10.00 WAWA gift card for participating in the study. Interestingly, one student declined a WAWA card as she stated she was very happy to be a part of the research study and to share her personal experiences. Another student declined the WAWA card and asked it be sent to her church of choice.

**Data Analysis**

The quantitative data from all research instruments were analyzed using IBM SPSS 21 provided by Rowan University. “Organizing or managing survey data is an essential part of data analysis” (Fink, 2013, p. 135). Some of the questions had ordinal values or interval ratio values. I assigned a number to the ordinal responses, as well as the interval ratio Likert style scale responses. This provided the ability to analyze the responses. Descriptive statistics for surveys included frequency distributions (numbers and percentages) and measures of central tendency (the mean, median, and mode) (Fink, 2013). A descriptive data table was formed, so that the research data results can be easily identified. This process of data analysis allowed for reduction and organization of the raw data on a manageable form that could manage, clean the data, reduce the data, transform the data, correlate and compare the data, as discussed in Greene (2007). Data analysis, a form of “social inquiry,” certainly gives the researcher a “spirit of adventure” with empirical data (Greene, 2007, p. 144). Further in-depth statistical analyses were not
conducted, as the small number of respondents would not result in any significant statistical findings.

Once all the qualitative data were obtained, they were analyzed to identify themes, then triangulated to show commonalities, and finally the data were merged together between the two data collection mixed method sources. Focus group discussions were transcribed, coded, and categorized, and analyzed in order to develop themes, identify patterns, and develop new questions. Descriptive coding was done on the first cycle and pattern coding on the second coding cycle. Descriptive coding identifies what is talked about or written about, whereas the pattern coding develops major themes (Saldana, 2009).

I integrated the qualitative data with the quantitative study. Teddlie and Tashakkori (2009) explain that integration “denotes making meaningful conclusions on the basis of consistent or inconsistent results” (p. 305). Inferences based on the integrated data were defined (Seifert, Goodman, King, & Baxter-Magolda, 2010). There are three inference concepts: inference process, inference quality, and inference transferability (Teddlie & Tashakkori, 2009). All of these various steps are an iterative process, a back and forth process between data collection and data analysis, when doing a mixed methods study (Jang et al., 2008; Teddlie & Tashakkori, 2009). “The main reason for using an mixed methods approach is to provide a better understanding of the phenomenon under investigation” (Teddlie & Tashakkori, 2009, p. 286). I then needed to interpret the data and refer back to the research questions, to come to a conclusion. I then developed the implications of the study and addressed any limitations.

Researcher bias was curtailed, so there was no intimidation or influence on the
participants when they spoke to me. As a non-Hispanic person, the researcher was respectful of the Hispanic culture, so there was no effect on participants’ answers in this study. Reactivity was controlled, so there was no influence on what the participant said, as it may “effect the validity of the inferences” that may be drawn from the interview (Maxwell, 2013, p. 125). Validity was secured by using two different data collection tools, surveys and focus groups, and close-ended and open-ended questions, to remove any flaws from one method and to provide a richer data summary.

Fifteen students total from both community colleges provided a sufficient amount of data to triangulate with the data from the seven nursing program administrators and to compare the results. Three means of data collection, electronic surveys, focus group, and telephonic interviews also promoted triangulation and richer data correlation. Table 3 shows a summary of the data sources, analysis technique, and interpretation techniques of the study.

Table 3

*Data Analysis Table*

<table>
<thead>
<tr>
<th>Data Source</th>
<th>Analysis Technique</th>
<th>Interpretation Technique</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing Program Administrator Survey</td>
<td>Descriptive statistics (frequency, measures of central tendency, measures of variations)</td>
<td>Descriptive statistics and categorizing open ended questions</td>
</tr>
<tr>
<td>Student Survey</td>
<td>Descriptive statistics and categorizing open ended questions</td>
<td>Pattern coding: Identified themes</td>
</tr>
<tr>
<td>Focus Group Questions</td>
<td>Descriptive Coding: Transcribed, coded, categorized and analyzed</td>
<td>Pattern coding: Identified themes</td>
</tr>
</tbody>
</table>
Trustworthiness

Teddlie and Tashakkori (2009) discuss Lincoln and Guba’s criteria of trustworthiness to include credibility, transferability, dependability, and confirmability for qualitative research while internal validity, external validity, reliability, and objectivity measure trustworthiness in quantitative data. Dependability and credibility of the data collection instruments were accomplished by having a fellow education colleague review the electronic and student survey as well as the focus questions to ensure each participant was receiving the same survey and that the survey included questions that related to the study. The peer reviewer agreed that the data collected from the instruments would be transferable to nursing education because of the thick description that would be received by the qualitative data of the students’ perceptions. Thick description “involves making detailed descriptions of the context and other aspects of the research setting so that other researchers can make comparisons with other contexts in which they are working” (Teddlie & Tashakkori, 2009, p. 296).

Three Hispanic students, not involved in the research sample, provided confirmability of the data collection instruments by completing the student survey, focus questions, and providing feedback to the researcher. These students were able to provide feedback if the survey was user friendly and easy to understand. Two Rowan University professors and nursing program administrators at SCC and NCC also reviewed the instruments prior to their usage.

Member checking was done by sharing the themes that were discussed in the focus groups with participants. This approach is important to allow the participants to verify that the findings of the focus groups were an accurate reflection of their words
(Creswell & Plano Clark, 2011). According to Teddlie and Tashakkori (2009), member checking is the “most important strategy for determining the credibility of the researcher’s interpretation of the participants’ perceptions” (p. 213). The participants provided further feedback if their perceptions were misinterpreted, or to confirm the information that was heard.

**Ethical Considerations**

Consideration was given to protect the rights of the participants in this research study. Institutional Review Board (IRB) permission was obtained from Rowan University and from SCC and NCC. There was minimal risk to the participants of this study. Participants, institutions, and students are anonymous and not revealed. All the nursing program administrators consented to the study based on them replying to the electronic survey. All Hispanic students signed informed consent and audiotape consent prior to taking the student survey, and participating in the focus group or telephone interviews. It was emphasized with the students that their names would be confidential and no faculty, colleges, or administration staff names would be identified. This was emphasized as the focus groups were held on their respective campuses and the researcher did not want any fear of retaliation to be a concern for the students. Thus the researcher was accountable for protecting the students from physical or mental harm and also any repercussions on their course grades. Any email addresses and phone numbers were destroyed after the student participated in the study. Confidentiality was adhered to by the researcher by not discussing the participants’ responses. There was no identified information on the survey, therefore, results could not be traced back to the students or institutions.
Summary of Methodology

In this chapter I discussed the research design of the study and how it would allow me to discover the perceptions of recruitment and retention of Hispanic nursing students by surveying associate degree nursing program administrators and the Hispanic nursing students. The various research protocols that were developed, online surveys, in-person surveys, focus groups, and telephone interviews assisted in answering the research questions. The use of quantitative and qualitative data, thus a mixed methods research design, presented richer information that provided the ability to conduct integrated analysis and produce the findings of the study in Chapter V.

My worldview as a researcher was discussed in this chapter to identify the interest in this topic for myself, as an educator and advocate for social justice. I would like to assist more Hispanic nursing students to enter the nursing profession and therefore, increase the diversity of the profession.
Chapter IV

Findings

This chapter will first discuss the findings from the electronic nursing program administrators’ survey, then the student survey and focus groups. Secondly, it will then corroborate the findings among each of the data collection instruments.

Electronic Survey

Seven nursing program administrators of the 15 who were surveyed, 46 percent, completed the electronic survey sent out via Survey-Monkey. One respondent did not answer all the answers which are why the total number might be different or a respondent skipped a question. Demographic questions (see Table 4) were asked that gave a broader picture of the colleges in regard to recruitment, admission, retention, graduation, financial aid, and age of the Hispanic nursing students. There were 85.7% (n=6) respondents who identified they were not from a Hispanic Serving Institution and 14.29% (n=1) were from a Hispanic Serving Institution. One respondent commented that their college was: “minority serving.” The majority of the respondents, 50% (n=3), admit six to ten Hispanic nursing students per year with 100% (n=6) being in the age range of 26 to 36 years old. The admission rate at one college “depends on how many apply and meet admission standards, there is no limit” according to one respondent. In hindsight, it would have been interesting if I had asked how many Hispanic students actually apply to the nursing program in order to identify if the Hispanic students were not qualified for admission.

Graduation and retention rates. According to the nursing program administrators who responded to the survey, the graduation rate for the Hispanic nursing
student is 40% ($n=2$) 75 to 100 percent of the time, while 40% ($n=2$) graduated 50 to 75 percent of the time, and 20% ($n=1$) graduated less than 50 percent of the time. Comments to this question were “it depends on how many apply and are admitted/yr” and “in the nursing program 80% graduation rate.” Fifty percent ($n=3$) stated their retention rate was 50% while the other fifty percent ($n=3$) stated it was 75%. The retention rate “varies with how many are admitted each year” was according to one respondent. The nursing program administrators are rarely, 50% ($n=2$), involved in recruitment of Hispanic nursing students, while 25% ($n=1$) never or sometimes are involved in recruitment of these students and 25% ($n=1$) are sometimes involved in recruitment. Comments made to this question included “we don’t recruit by ethnicity,” “I am involved in recruiting all students, we do not differentiate between Hispanic and non-Hispanic,” and “recruit all students-do not target Hispanic.” Scholarship and grants specifically for the Hispanic nursing student are provided by 14.29% ($n=1$) of the colleges. One comment to this question was that the “nursing department specifically does not (offer scholarships) but the college does.” I was surprised that the nursing program administrators were not as involved in recruitment, probably because in my prior experience at another nursing program, the Dean was very involved in recruiting students and I believe the nursing program administrators should be aware of the need for more Hispanic nurses.

Obstacles, barriers, and challenges. Obstacles, barriers, and challenges are observed in the Hispanic nursing students “often” by 33.33% ($n=2$), “sometimes” by 33.33% ($n=2$), and 16.67% ($n=1$) for both “never” and “rarely observed.” Faculty provide support services to the Hispanic nursing student “often” 100% ($n=4$) of the time.
Comments to this question made by the nursing program administrators included “all students are provided support,” “whenever they need support,” “support is for all, not focused on Hispanics.” Hispanic nursing students would be more successful if they accepted more support services according to 100% (n=4) of the respondents and two comments to this questions were “they are offered the same support as everyone else” and “unknown-never had a problem.” It seems based on their responses that nursing program administrators did not want to single out Hispanic students therefore, not to discriminate, which is why they wrote in the open ended questions “all students” or “support for all.”

Table 4

Statistics Questions #1 to #10.

<table>
<thead>
<tr>
<th>Question</th>
<th>n</th>
<th>Mean</th>
<th>Median</th>
<th>Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. HSI</td>
<td>7</td>
<td>1.1429</td>
<td>1.0000</td>
<td>1.00</td>
</tr>
<tr>
<td>2. Grants</td>
<td>7</td>
<td>1.1429</td>
<td>1.0000</td>
<td>1.00</td>
</tr>
<tr>
<td>3. Admitted</td>
<td>6</td>
<td>2.3333</td>
<td>2.0000</td>
<td>2.00</td>
</tr>
<tr>
<td>4. Retention</td>
<td>6</td>
<td>2.5000</td>
<td>2.5000</td>
<td>2.00</td>
</tr>
<tr>
<td>5. Age</td>
<td>6</td>
<td>2.0000</td>
<td>2.0000</td>
<td>2.00</td>
</tr>
<tr>
<td>6. Obstacles, Barriers, Challenges</td>
<td>6</td>
<td>2.8333</td>
<td>3.0000</td>
<td>3.00</td>
</tr>
<tr>
<td>7. Frequency of involvement in recruitment</td>
<td>4</td>
<td>1.5000</td>
<td>1.5000</td>
<td>1.00</td>
</tr>
<tr>
<td>8. Frequency faculty support services</td>
<td>4</td>
<td>4.0000</td>
<td>4.0000</td>
<td>4.00</td>
</tr>
<tr>
<td>9. More successful if accept support services</td>
<td>4</td>
<td>1.0000</td>
<td>1.0000</td>
<td>1.00</td>
</tr>
<tr>
<td>10. Graduate rate</td>
<td>5</td>
<td>2.2000</td>
<td>2.0000</td>
<td>2.00</td>
</tr>
</tbody>
</table>

Note: 1) HSI: No=1, Yes=2. 2) Grants: No=1, Yes=2. 3) Admitted 0-5=1, 6-10=2, 11-20=3, 21-30=4. 4) Retention: Less than 25%=1, 50%=2, 75%=3, 100%=4. 5) Age: 18-25=1, 26-36=2, 37-47=3, over 47=4. 6) Obstacles, Barriers, Challenges: Never=1, Rarely=2, Sometimes=3, Often=4, Always=5. 7) Frequency of involvement in recruitment: Never=1, Rarely=2, Sometimes=3, Often=4, Always=5. 8) Frequency of faculty support services: Never=1, Rarely=2, Sometimes=3, Often=4, Always=5. 9) More successful: Yes=1, No=2. 10) Graduation Rate: Less than 50% of the time=1, 50-75% of the time=2, 75-100% of the time=3.
Open-ended questions were on the electronic survey for the purpose of gathering more detailed information about recruitment, obstacles, barriers, challenges, and retention. A majority of the respondents, 66.66% \((n=4)\) observed that language was a challenge, barrier, or obstacle for the students (see Table 5) while financial, reading, family, job, and school responsibilities were noted 16.66% \((n=1)\) respectively for each. One respondent commented that “I have observed that they have the same challenges, barriers, and obstacles of every other student. If English is their second language then of course that would be an additional barrier.” The presence of language barriers was well discussed in the literature, so there is still consistency in this being an obstacle for the Hispanic student.

Table 5

Summary of Question #11: What Have You Observed as the Challenges, Barriers, and Obstacles for the Hispanic Nursing Student?

<table>
<thead>
<tr>
<th>Comments</th>
<th>(n)</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language</td>
<td>4</td>
<td>66.66%</td>
</tr>
<tr>
<td>Financial</td>
<td>1</td>
<td>16.66%</td>
</tr>
<tr>
<td>Reading</td>
<td>1</td>
<td>16.66%</td>
</tr>
<tr>
<td>Family responsibilities</td>
<td>1</td>
<td>16.66%</td>
</tr>
<tr>
<td>Work responsibilities</td>
<td>1</td>
<td>16.66%</td>
</tr>
<tr>
<td>School responsibilities</td>
<td>1</td>
<td>16.66%</td>
</tr>
</tbody>
</table>

*Note. More than one comment allowed.*

The respondents were all equal, 25% \((n=1)\) for the most successful means to recruit Hispanic nursing students (see Table 6). These recruitment strategies included face-to-face interviews and open houses. However, two respondents stated they “recruit for all students the same” and “do not recruit by ethnicity.” Retention of Hispanic nursing
students was most successful by meeting one-on-one with their advisor frequently, 33.33% (n=2), while ESL, remediation, mentoring, and tutoring were all mentioned by one respondent respectively and one comment was that there is “no distinction,” (see Table 7).

Table 6

*Summary of Question #12: What Has Been the Most Successful Means to Recruit Hispanic Nursing Students to Your College?*

<table>
<thead>
<tr>
<th>Comments</th>
<th>n</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face to face interviews</td>
<td>1</td>
<td>25%</td>
</tr>
<tr>
<td>We do not recruit by ethnicity</td>
<td>1</td>
<td>25%</td>
</tr>
<tr>
<td>Open houses</td>
<td>1</td>
<td>25%</td>
</tr>
<tr>
<td>We recruit all students exactly the same way</td>
<td>1</td>
<td>25%</td>
</tr>
</tbody>
</table>

Table 7

*Summary of Question #13: What Has Been the Most Successful Means of Retaining Hispanic Nursing Students at Your College?*

<table>
<thead>
<tr>
<th>Comments</th>
<th>n</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting with advisor, one on one</td>
<td>2</td>
<td>33.33%</td>
</tr>
<tr>
<td>English as a Second Language</td>
<td>1</td>
<td>16.66%Remediation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>33.33%</td>
</tr>
<tr>
<td>Mentoring</td>
<td>1</td>
<td>16.66%</td>
</tr>
<tr>
<td>Tutoring</td>
<td>1</td>
<td>16.66%</td>
</tr>
<tr>
<td>No distinction</td>
<td>1</td>
<td>16.66%</td>
</tr>
</tbody>
</table>

*Student Survey*

Fifteen Hispanic nursing students completed a paper and pencil student survey. Table 8 depicts the response rates for questions one to six. The Hispanic students’ ages
ranged from 20 to 40, with an average age being 28.73. The majority of the students were in their fourth semester 53.3% \( (n=8) \) and 33.33% \( (n=5) \) had a prior college degree. The college degrees were in psychology, teaching degree, business administration, science, and the arts. All 100% \( (n=15) \) of the students identified as Hispanic or Latino/a descent. Eighty-percent \( (n=12) \) of the students were born in the United States. Puerto Rican was the majority ethnic origin for the Hispanic students at 46.66 % \( (n=7) \). According to the previous literature, Hispanic students are behind in obtaining a bachelor’s degree compared to other non-Hispanic students. Therefore, it was interesting that a third of the students already had a bachelor’s degree.

Table 8

Summary of Student Survey Questions #1 to #6.

<table>
<thead>
<tr>
<th></th>
<th>( n )</th>
<th>Mean</th>
<th>Median</th>
<th>Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>15</td>
<td>6.733</td>
<td>7.000</td>
<td>2.00</td>
</tr>
<tr>
<td>Semester</td>
<td>15</td>
<td>3.270</td>
<td>4.000</td>
<td>4.00</td>
</tr>
<tr>
<td>Degree</td>
<td>15</td>
<td>1.333</td>
<td>1.000</td>
<td>1.00</td>
</tr>
<tr>
<td>Hispanic</td>
<td>15</td>
<td>1.000</td>
<td>1.000</td>
<td>1.00</td>
</tr>
<tr>
<td>US Born</td>
<td>15</td>
<td>1.200</td>
<td>1.000</td>
<td>1.00</td>
</tr>
<tr>
<td>Origin</td>
<td>15</td>
<td>3.466</td>
<td>3.000</td>
<td>3.00</td>
</tr>
</tbody>
</table>

Note: 1) Age: 20=1, 22=2, 24=3, 25=4, 26=5, 27=6, 28=7, 29=8, 30=9, 31=10, 38=11, 40=12. 2) Semester: \( 1^{st}=1, 2^{nd}=2, 3^{rd}=3, 4^{th}=4 \). 3) Degree: No=1, Yes=2. 4) Hispanic: Yes=1, No=2. 5) US Born=Yes=1, No=3. 6) Origin: Mexican =1; Cuban=2; Puerto Rican=3; Salvadoran=4; Dominica=5; Guatemalan=6; Colombian=7; Honduran=8; Ecuadorian=9; Peruvian=10; Other =11

The student survey questions, number 7 to 14, were each given a nominal number to the answers in order to conduct descriptive statistics of the data (see Table 9). The first generation college students comprised 46.66% \( (n=7) \) of the sample. Sixty percent \( (n=9) \) of the students sought support services 1 to 3 times in the last month while 66% \( (n=10) \)
sought support from their advisor in the last month zero times. Family responsibilities prevented 53.3\% (n=8) of the students from seeking support services in the last month. The majority of the students 66.66\% (n=10) agreed that they would use academic support if the nursing faculty were available more days/times. Family responsibilities and job responsibilities prevented students from seeking help 60\% (n=9) of the time. The literature previously discussed concurred that Hispanic students have many responsibilities beyond college and they can be a barrier for them to be successful. A majority of the students stated they were not recruited, 46.66\% (n=7), but rather pursued the college on their own. This result is not surprising since many of the nursing program administrators are not involved in recruitment, and if they are, many of them were not specifically recruiting for Hispanic students.
Table 9

Summary of Student Survey Questions #7 to #14.

<table>
<thead>
<tr>
<th>Question #</th>
<th>n</th>
<th>Mean</th>
<th>Median</th>
<th>Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. First generation</td>
<td>15</td>
<td>1.5333</td>
<td>1.5333</td>
<td>2.0</td>
</tr>
<tr>
<td>8. Sought support service past month</td>
<td>15</td>
<td>2.0</td>
<td>2.0</td>
<td>2.0</td>
</tr>
<tr>
<td>9. Sought support from advisor past month</td>
<td>15</td>
<td>1.333</td>
<td>1.000</td>
<td>1.0</td>
</tr>
<tr>
<td>10. Family responsibilities prevented seeking help</td>
<td>15</td>
<td>2.1333</td>
<td>2.000</td>
<td>2.0</td>
</tr>
<tr>
<td>11. Faculty available more</td>
<td>15</td>
<td>1.333</td>
<td>1.000</td>
<td>1.0</td>
</tr>
<tr>
<td>12. Faculty understood needs</td>
<td>15</td>
<td>1.4667</td>
<td>1.000</td>
<td>1.0</td>
</tr>
<tr>
<td>13. Prevents me seeking support</td>
<td>15</td>
<td>1.7333</td>
<td>1.000</td>
<td>1.0</td>
</tr>
<tr>
<td>14. Recruitment</td>
<td>15</td>
<td>5.6667</td>
<td>4.000</td>
<td>9.00</td>
</tr>
</tbody>
</table>

Note: Question #7: Yes=1, No=2. Question #8: 0 times=1, 1-3 times=2, 4-7 times=3, greater than 7 times=4. Question #9: 0 times=1, 1-3 times=2, 4-7 times=3, greater than 7 times=4. Question #10: 0 times=1, 1-3 times=2, 4-7 times=3, greater than 7 times=4. Question #11: Agree=1, Disagree=2. Question #12: Agree=1, Disagree=2. Question #13: Job Responsibilities=1, Family responsibilities=2, lack of self-confidence=3, Other=4. Question #14: Family=1, Friend=2, Advisor=3, Website=4, Other=5, Nursing program Recruiter=6, Classmate=7, Nursing program administrator=8, Not recruited pursued on my own=9.

The students were asked on the survey what they considered to be a support service (Table 10). Only five of the ten possible support services received greater than 50% of the students’ choices: advisement, remediation, review after an exam/quiz, and test taking strategies.
Table 10

Summary of Student Survey Question #8A: What Do You Consider to be Support Services?

<table>
<thead>
<tr>
<th>Service</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review after exam/quiz</td>
<td>10</td>
<td>66.66</td>
</tr>
<tr>
<td>Review before exam/quiz</td>
<td>9</td>
<td>60</td>
</tr>
<tr>
<td>Advisement</td>
<td>8</td>
<td>53.33</td>
</tr>
<tr>
<td>Test taking strategies</td>
<td>8</td>
<td>53.33</td>
</tr>
<tr>
<td>Remediation</td>
<td>8</td>
<td>53.33</td>
</tr>
<tr>
<td>Tutoring lecture content</td>
<td>7</td>
<td>46.66</td>
</tr>
<tr>
<td>ESL</td>
<td>6</td>
<td>40</td>
</tr>
<tr>
<td>Math tutoring</td>
<td>6</td>
<td>40</td>
</tr>
<tr>
<td>Student Hispanic Organization</td>
<td>5</td>
<td>33.33</td>
</tr>
<tr>
<td>Mental Health Counselor</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*Note. Students may have picked two or more choices.*

Question number 15 on the student survey asked to write down on this open-ended question any items they thought would be helpful for this study about their experiences in being recruited and receiving support services at their college. The responses included the following:

“I think peer support is the best. It would be nice to have 1st year/2nd year mentoring program.”

“Understanding from the faculty when the language gets in the way.”

“The orientation to the nursing program was helpful in letting the incoming students know how the program works and what to expect. The professors are supportive to one’s needs, especially if the students have questions after lecture or during review for an exam.”
“Tutors available for every level from students who have successfully passed with good grades so that those seeking tutoring can understand and adopt their views in how to study and learn concepts better.”

These comments from the students were very insightful, and can enlighten nursing educators to the needs of the students.

Focus Group/Telephone Interviews

Students felt they were an ethnic minority in 100% \((n=15)\) in their most recent classroom experiences. Students estimated that the number of Hispanics in their classroom was between 10 to 25%. Students varied on who their main support system was during their college years (see Table 11), however, they felt their mother was the most supportive 46.6% \((n=7)\). The fact that the mother was the most supportive is possibly due to the students living at home with their mother, or in close proximity to her, or just the cultural attachment to their mother.

Table 11

Summary of Support Systems

<table>
<thead>
<tr>
<th>Type</th>
<th>(n)</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother</td>
<td>7</td>
<td>46.66</td>
</tr>
<tr>
<td>Child</td>
<td>2</td>
<td>13.33</td>
</tr>
<tr>
<td>Grandmother</td>
<td>2</td>
<td>13.33</td>
</tr>
<tr>
<td>Aunt</td>
<td>2</td>
<td>13.33</td>
</tr>
<tr>
<td>Co-worker</td>
<td>2</td>
<td>13.33</td>
</tr>
<tr>
<td>Father</td>
<td>2</td>
<td>13.33</td>
</tr>
<tr>
<td>Child’s father</td>
<td>2</td>
<td>13.33</td>
</tr>
<tr>
<td>Babysitter</td>
<td>3</td>
<td>20.00</td>
</tr>
<tr>
<td>Family</td>
<td>4</td>
<td>26.66</td>
</tr>
<tr>
<td>Classmates</td>
<td>3</td>
<td>20.00</td>
</tr>
<tr>
<td>Spouse</td>
<td>1</td>
<td>6.66</td>
</tr>
<tr>
<td>Sister</td>
<td>1</td>
<td>6.66</td>
</tr>
</tbody>
</table>
**Faculty support.** Students varied on question number 6, “Have faculty been supportive of you in your college experience?” Eighty-percent ($n=12$) of the students felt that faculty were supportive to them, while 13.33% ($n=2$) felt that faculty were not supportive to them and 6.66% ($n=1$) said it “depends on the faculty, some help more than others.” Those students who felt faculty were supportive stated “some faculty helped me with books because I did not have the money,” “some advise more than others and help you in any way possible,” “one of my professors offered me help after hours and did a video chat before an exam,” and “no problem when I asked a question.” It is positive to hear that the majority of the students felt supported. It is important to have a supportive atmosphere to help the students learn and to retain them in a program.

Those students who felt faculty was not supportive to them had a variety of comments, which included the following:

“One particular faculty member did not help me at all. She did not understand why I was on my phone all the time but I was using it to translate. I would get frustrated and I would just leave.”

“Faculty would tell us in the Beginning of the semester they will help us but they don’t go out of their way to help students. Not connecting with any students.”

“They can’t get emotionally attached to us.”

“I felt on my own.”

One student stated they (faculty) should “be straight forward.”

Students identified many barriers as to why students might not apply to nursing school during the focus group question number 9 (see Table 12). The most frequent responses were language barriers/broken English, financial aid, along with a lack of
support systems to help them during their college experience. The list of barriers is important as they can serve to help nursing program administrators to make changes in their recruitment and retention efforts.

Table 12

Summary of Barriers That Might Prevent Students to Apply to Nursing School

<table>
<thead>
<tr>
<th>Category</th>
<th>n</th>
<th>Subcategory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language barriers</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>Broken English</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Professors lecture too quickly</td>
</tr>
<tr>
<td>Money</td>
<td>13</td>
<td>No Financial aid</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>Have to pay out of pocket</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>Nursing courses more expensive if a clinical course</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Large families prefer working than going to school need money</td>
</tr>
<tr>
<td>Support Systems</td>
<td>1</td>
<td>Family out of country</td>
</tr>
<tr>
<td></td>
<td>15</td>
<td>Help from family</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>Single mom</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>Lack of support first in family to go to college</td>
</tr>
<tr>
<td>Responsibilities</td>
<td>5</td>
<td>No child care</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Families to support</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>Work and school</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Can’t work fulltime, family priority</td>
</tr>
<tr>
<td>Psychological</td>
<td>5</td>
<td>Lack of confidence</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>Intimidating if parents did not go to college</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Lack of understanding (material) and translating theory</td>
</tr>
</tbody>
</table>

Students were asked during the focus group, questions number 5 and 7, about their engagement with other non-Hispanic students and if they felt there were any stereotyped attitudes about Hispanics students on their campus. These questions were in relation to Schlossberg’s (1989) and Torres’ theory (2003). A question in relation to Schlossberg’s (1989) theory would elicit whether the students felt they mattered, and thus that were they important and appreciated. Application of Torres’ theory (2003) would assist in identifying if the environment might be impacting the students on campus and thus affecting their learning. All but one student said that there were no stereotyped
attitudes on the campus, but one student said “Sometimes I feel that way. People make
you feel like they’re talking down to you.” The majority of the students agreed that they
do engage on campus with other non-Hispanic students. They stated they “collaborate
with one another,” “race is not an issue,” “of course” and “yes I do.” Non-verbal
communication was noted by the researcher that the students seemed to be surprised by
this question and did not understand why it would be asked.

Question number 3 in the focus group asked whether the students felt their ethnic
background impacted their learning or academic success. Not all students answered this
question in the first focus group, but some said “yes” and some “no,” while those who
were asked in a one-on-one telephone interview, seven said no and two said yes. The
comments made toward this question all related to a language barrier answer. The
comments included:

“It has impacted me a beneficial way. Being in the clinical area with a language
barrier has helped me to mold my skill.”

“In my first semester my friend would translate for me and I would look at my
phone and Google a word that I did not understand. It is a problem for me sometimes
when they say a word that I don’t understand.”

“Others would ask me why I was always on my phone and I would say I am
translating. It is the regular English I do not know. The medical terms we are all learning
together. Some of the English words I do not know. It gets in the way. I am trying to
search the word and they keep going and I am still stuck on that word. I am loosing what
they are actually doing.”

Students felt that the most effective way for them to learn, question 8, was by

73
“hands-on” learning (see Table 13). They also stated that lecture, reading the material out loud, and recording the lecture and then having the same clinical experience that week in clinical was second most valuable, 13.33% ($n=2$), respectively for each type of learning. The other five ways they learn were lecture, audio, meeting before exams, simulation, and the teachers explaining the lecture material were all effective ways they learned. This is important information for nurse educators so they can promote more “hands-on” activities in class and or in the clinical environment.

Table 13

*Most Effective Ways for Students to Learn*

<table>
<thead>
<tr>
<th>Type of learning</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hands-on</td>
<td>5</td>
<td>33.33%</td>
</tr>
<tr>
<td>Record lecture</td>
<td>2</td>
<td>13.33%</td>
</tr>
<tr>
<td>Read it and read out loud</td>
<td>2</td>
<td>13.33%</td>
</tr>
<tr>
<td>Lecture that matches clinical experience/hands-on</td>
<td>2</td>
<td>13.33%</td>
</tr>
<tr>
<td>Lecture</td>
<td>1</td>
<td>6.66%</td>
</tr>
<tr>
<td>Audio</td>
<td>1</td>
<td>6.66%</td>
</tr>
<tr>
<td>Teachers not reading PPT’s explaining application</td>
<td>1</td>
<td>6.66%</td>
</tr>
<tr>
<td>Meet before exams</td>
<td>1</td>
<td>6.66%</td>
</tr>
<tr>
<td>Simulation</td>
<td>1</td>
<td>6.66%</td>
</tr>
</tbody>
</table>

Students had a wealth of information to share that would be helpful to nursing program administrators, future students, and their current peers that might assist in recruitment and retention. The participant responses were grouped into themes.

**Diverse faculty.** Students stated that “hiring diverse staff, mainly Spanish speaking,” for “language purposes to explain it better” and “Hispanic professors
understand me better and went out of their way to offer help.” Unfortunately, the number of Hispanic faculty is minimal compared to non-Hispanic faculty numbers at most academic centers.

**Recruitment.** Students had many suggestions to help with recruitment and retention, such as, “reach out to high schools, local communities where Hispanics live,” “promote the nursing program,” “recruit more, advertisements, many Hispanics lower self down and feel discriminated and out of the pool to get accepted,” “do not put so much emphasis on the English section of the TEAS assessment. This section could have prevented me from getting into nursing school. Just because I had a low English score does not mean I would not pass,” “need flexible classes,” and “offer evening classes.” Many of their suggestions were discussed in the review of the literature, and the suggestions are being done on other college campuses.

**Encouragement.** The suggestions by the students reflected on increasing their self-confidence, and the need to be assertive in what they wanted in their life regarding careers. The students suggested to “tell others what the benefits are of becoming a nurse and how it will help you grow individually and financially and help with stability.” One student was discouraged stating “high school counselors advised me to be a CNA (Certified Nurse’s Aide) or a hairdresser. The students felt counselors should encourage “professional positions.” Faculty could be more supportive, according to the students, by “have (ing) ethnic minority students come back and give
“inspiration to us,” “get us all together middle of the semester to talk about how our semester is going, more chance students will open up.” One student stated that in her “last clinical I had an Hispanic patient who did not know that I was Hispanic and once the patient found out I was Hispanic and spoke Spanish the patient was more comfortable with me,” “Spanish is a plus with patients in clinical.” Student feedback also included that faculty should “encourage students,” “apply yourself,” and students “need reassurance.” The lack of confidence was discussed in the review of the literature, thus the students need more encouragement and reassurance from nurse educators.

**Program challenges.** Various challenges were discussed by the students, “due to the language barrier, Hispanics don’t want to go into school to learn medical terms as we need ESL help,” college “can be intimidating,” “bullying happens,” and “it is competitive.” The students encouraged other prospective students to “save money for books,” “apply for scholarships,” they “might feel non-confident,” and it is most important to “manage time wisely.”

**Support services.** Students felt that other support services would be helpful for recruitment and retention. “Mentoring” would be beneficial, “have 3rd level tutors for lower level students,” a “summer refresher,” consider to “ask for help,” and then “get help.”
Chapter V

Findings, Recommendations, and Conclusion

Summary of the Study

The purpose of this research study was to compare the perceptions of nursing program administrators with the perceptions of Hispanic nursing students regarding the obstacles, barriers, and challenges of Hispanic nursing students and their perceptions of recruitment and retention at their colleges. The desired goal was to identify practices of recruitment and retention efforts that can be adapted by other nursing schools to increase the graduation rate of more Hispanic nursing students. Increasing the Hispanic student population who will be eligible to take the NCLEX-RN examination will increase the number of new registered nurses that can provide culturally competent care to the increasing Hispanic population. This chapter will conclude with a discussion of each of the research questions with a comparison of the nursing program administrators and the students’ perceptions. These results cannot be generalized among all associate programs since students from only two associate degree nursing programs participated, and only seven nursing program administrators participated.

Comparison of Findings

Research question #1. What strategies do nursing school administrators use to attract and recruit Hispanic students? There is definitely a lack of nursing program administrators specifically recruiting for Hispanic nursing students, although they do seem to be involved in recruiting all students. The lack of recruitment by ethnicity opens up the question as to why they are not performing this to increase the diversity of their students, especially to enhance the pipeline for more Hispanic registered nurses. The
nursing profession and many national organizations have emphasized the need to increase the Hispanic registered nurse population to provide cultural competent nursing care (AACN, 2013; ANA, 1991; Gilchrist & Rector, 2007; IOM, 2001; NAHN, 2013; Noone, 2008; Oomen et al., 1999; Sullivan, 2004). The fact that only one college specifically gave scholarships and grants, as a recruitment strategy, to Hispanic students may be due to the fact that only 3 of the 15 community colleges in this Mid-Atlantic state are an HSI. The literature substantiated these findings as authors stated that funding is often not available to increase the minority representation in nursing programs (Chacon et al., 1986; Doutrich et al., 2005).

The nursing program administrators did identify two effective means to recruit Hispanic students: by face-to-face interviews and open houses. Open houses are a good strategy for the Hispanic students to observe how many other students are from their culture and thus might encourage them to apply to the college. Face-to-face interviews are an effective way to learn more about the Hispanic students, assist them in learning more about the program, and possibly can give them encouragement that they can be successful in the program.

The Hispanic students concur with the nursing program administrators’ lack of involvement with recruitment efforts, as none of the students stated they were recruited by the administrator or by a nursing program recruiter; however, the most common means of recruitment to the college was by the student doing a self-inquire of the college and enrolling without being recruited. Since the literatures states that Hispanic students are often not confident and usually shy it would be beneficial to have an internal person at the college reach out to more Hispanic students in order to
increase enrollment.

The Hispanic students had some great suggestions for recruitment strategies that could be instituted by the nursing program administrators. The students suggested reaching out to high schools, reaching out to the communities where Hispanics live, advertising more, offering flexible evening courses, and putting less emphasis on English scores on pre-admission testing. Encouragement was a common thread through the comments made by students, such as telling students the benefits of being a nurse, having prior students come back to talk to them, and having an effective rapport with the students all throughout the year.

Noone (2008) also suggests many of the above recruitment strategies and encouraged schools of nursing to have summer camps, faculty visit local high school and middle schools to promote the nursing profession, and allow pre-nursing students to take college courses. Washington State developed a video of the role of the registered nurse for recruitment purposes (Evans, 2003), and focus groups have been conducted to decipher the barriers of recruitment for the Hispanic student (Villarruel et al., 2001)

**Research question #2.** How do nursing school administrators and students perceive the success of their processes to obtain applicants? Success of the recruitment efforts by the nursing program administrators can be determined by how many Hispanic students are admitted to the nursing program. The majority of the respondents stated that 6 to 10 Hispanic students were admitted each year, while two other respondents stated it was higher, at 12 and 21 to 30 respectively. Since the question was not asked of the colleges “How many total students do you accept each year?” a statistical
result was not able to be made. From my own knowledge and experience most community colleges accept about 50-60 new nursing students each semester. Therefore, the average noted in this study, 6 to 10 Hispanic students, would range between 12 and 16 percent, which is higher than the National League of Nursing’s (2013) statistic that six percent of Hispanic students are in an associate’s degree program. The enrollment numbers vary depending on the geographical location of the college and the Hispanic population in the college community. In comparison, the students, as stated previously, were more likely to recruit themselves to the college, without being recruited, therefore it does not seem that the college can feel successful that their processes are working when it comes to recruitment.

In regards to the students’ perceptions of the success of the college’s recruitment efforts, the students had numerous suggestions for recruitment, previously discussed in research question number 1, such as reaching out to high schools, reaching out to the communities where Hispanics live, offering flexible evening courses, encouragement from other students, and the faculty having an effective rapport with the students all throughout the year. All of these suggestions could increase the number of students applying to the program. The tone of their suggestions was that the college’s recruitment efforts were not enough and more could be done to obtain more applicants.

**Research question #3.** How are Hispanic nursing students attracted to associate degree schools of nursing? Hispanic nursing students could be attracted to associate nursing programs if the colleges identified as a Hispanic Serving Institution. Only one of the nursing program administrators that responded identified as being from a designated HSI community college. Based on the number of Hispanic students that
were admitted each year, there seems to be a lack of attraction to the associate’s degree program, but that could be the result of many variables previously discussed in the research question number 1. Since the students often are not recruited by the college or nursing programs, they are personally inquiring and seeking out the information themselves, and there is limited information coming to them in the community or in the high schools. In some cases, the students were actually not being encouraged by high school counselors to even attend nursing school. Taxis (2002) charged nursing administrators to provide leadership and evaluate their “institutional policies, recruitment efforts, and retention strategies” (p. 258) in order to obtain more Hispanic nursing students.

**Research question #4.** What obstacles, barriers, and challenges do nursing students experience, according to the nursing school administrators and the Hispanic students? There is the possibility that the students have some obstacles to overcome before they applied to nursing school based on the fact that 100% of the students were aged 26 to 36 years old. Since most students enter college after high school, many obstacles could have been apparent, such as family responsibilities, job responsibilities, familism, financial aid, or just not being sure they wanted to be a registered nurse or could be a registered nurse. The nursing program administrators did “sometimes” or “often” observe obstacles, barriers, and challenges of the Hispanic students, mostly in the area of language issues, but family responsibilities and work responsibilities, school responsibilities, as well as financial and reading abilities were also of concern.

The Hispanic students agreed with the nursing program administrators as they
also overwhelmingly felt that language was a major barrier for Hispanic students. They also stated that they experienced financial need, responsibilities, family, support systems, as well as psychological barriers, and these barriers might prevent other Hispanic students from entering nursing school. The ages of the Hispanic students who were surveyed ranged from 20 to 40 years old, with an average age of 28.73 years old mirrored with the nursing program administrators who stated the average age of their Hispanic nursing students was 26 to 36 years old.

Fourteen of the 15 Hispanic nursing students did not feel marginalized or stereotyped by other non-Hispanic students at their colleges. Possibly the student development theories of Schlossberg (1989) and Torres (2003) are outdated, or possibly I had some generational bias for thinking that the Hispanic students are experiencing stereotyped attitudes on today’s campuses. This bias came into question when the students present in the focus group were observed as being surprised that I would ask such a question. As I previously stated, in my worldview as a researcher, I grew up in a time of much racial turmoil and prejudice, which maybe has not left my memory, and I possibly still think that might still exist on the campuses of today.

Obstacles, barriers, and challenges that the Hispanic nursing students experience were abundantly apparent in the literature. Kenechukwu et al. (2009) mention cultural norms and the concern about the family being a barrier to the students. There were other obstacles, barriers, and challenges noted in the literature, such as, 1) a lack of confidence (Noone, 2008), 2) stress and lack of social support (Mayvill & Huerta, 1997), 3) a concern of equality in testing due to language barriers (White House Initiative, 2000) and 4) possibly racism from faculty members (Barbee & Gibson, 2001).
**Research question #5.** What support services are perceived by Hispanic students as being effective or non-effective? The effectiveness of support services being offered to students can be evaluated by the graduation rates and retention rates of the students.

Eighty percent ($n=4$) of the nursing program administrators responded that their Hispanic nursing students graduated 50% to 100% of the time. The retention rate ranged from 50 percent to 75 percent; however, it can depend on the number of students admitted each year. It was felt by a majority of the nursing program administrators that all students using remediation support services and meeting with their nursing advisor was the most successful means of retaining the students. Faculty often provide support services to the students, and the faculty feel that if the students used the support services more they would be more successful.

Although the nursing program administrators felt the support services were available, a majority of the Hispanic nursing students perceived that their family responsibilities prevented them from seeking support services, and they thought if the support services were more available at various times and days they would use the support services more often. A majority of the students perceived that their mother was their main support system, that faculty were supportive of them, and that the most effective means of learning for them was hands-on experience.

Various creative support services for the Hispanic nursing students were discussed in the literature review. In Philadelphia, Pennsylvania, a Latino Nurses Project was developed in the neighborhood for the Hispanic (Latino) student to receive tutoring, counseling, and mentorship (Jones-Torres & McDevitt, 1995). Colleges use mentoring, critical thinking, and reading comprehension programs to increase their retention rates.
AACN, 2011) and having Hispanic faculty as role models (Barbee & Gibson, 2001).

**Conceptual Framework**

In the literature review, two student development theories were introduced as a basis for the study to possibly determine if the Hispanic nursing students’ recruitment and retention was affected by others in their environment, such as non-Hispanic students. Although the Hispanic students were the ethnic minority in their recent classroom experience, 10-25% of the classroom was made up of Hispanic students, and except for one student, they did not perceive that there were any stereotyped attitudes on their campuses and that they all engaged with other non-Hispanics on campus. This was beneficial feedback from the students, because it showed that although the students were experiencing marginality or a transition to college, mattering was present to assist them in feeling connected to others (Schlossberg, 1989). Torres’ theory of how the majority can influence the minority does not seem to be evident on the campuses that the students attend because they stated they did not feel any tension or oppression from the non-Hispanic students on campus (Torres et al., 2009).

Torres’ (2003) theory is important for educational administrators because a person’s self-perception of societal status can play an important part in the Hispanic student identifying with his or her own culture and the environment. I cannot conclude that all the students’ recruitment and retention on the campuses where the research was conducted was not affected by the environment, or stereotyping from other cultures, because of the low number of participants. These are important aspects to measure because the colleges want all students to feel safe, acknowledged, and have an equal opportunity to be successful.
Recommendations for Practice

Health care institutions hiring more Hispanic nurses will increase the number of health care professionals who are more knowledgeable of the Hispanic culture, will assist in more positive patient outcomes, and decrease health disparities. Directors of nursing or chief nursing officers need to be educated on the needs of Hispanic patients, and how, in their position, they can help decrease health disparities at their hospitals or other health care institutions. Institutional leaders can also solicit grants and scholarships from various organizations or vendors that could provide financial means for their Hispanic employees to return to college and become registered nurses.

Recommendations for Further Research

It is recommended to have more participants from the nursing program administrators in a research study. This study was only able to obtain seven respondents. Possibly conducting one-on-one interviews would improve their input to the questions. Increasing the student sample from other nursing pre-licensure programs, such as bachelors and diplomas schools, might provide more valuable information as each of these schools have different policies and procedures for student recruitment and retention. The focus groups and interviews provided a very rich description of the Hispanic nursing students’ perceptions, whereas the nursing program administrator feedback was not as rich because it was an electronic survey. The passion or lack of passion of the nursing program administrators’ role as educators could not be felt without that personal interaction, whereas the students’ passion for becoming a nurse was very evident.

Investigation needs to occur into the pre-admission requirements that Hispanic
students take, such as the TEAS examination that has a large English component. Possibly the English portion might be able to be altered, especially for those Hispanic students who have a language barrier, which may increase their chances of being admitted to a nursing program. Hispanic nursing students from associate’s degree nursing programs should be interviewed to determine why they were unsuccessful. In this research study, all the students were currently successful in their nursing program because they were progressing to the next semester, however, further study is needed to determine why were they were successful and others were not.

There was a gap in the literature regarding how Hispanic students are counseled in high schools by guidance counselors. This area should be studied to discover if the counselors are advising the Hispanic students to become registered nurses, especially in this time of great need for more Hispanic nurses. Further research is needed as to how and to what extent high schools and middle schools are exposing Hispanic students to health careers and professional careers.

**Recommendations for Nursing Education**

Nurse educators need to be on the forefront of knowing the changing demographics of the country, and how this will impact their teachings to students. There needs to be a mirror image of students to the country’s diverse population. Mayo et al. (2014) challenge nursing education programs to “incorporate and assess cultural competence within curricula, further assessment of social interactions and previous clinical experiences may be warranted, as they may be important predictors of readiness to treat Latino (Hispanic) patients” (p. 311). The use of guest speakers, educational
community partnerships, and study abroad are also beneficial strategies for cultural competence training (Long, 2012).

The Hispanic students were very willing to share their perceptions. It became apparent that there needs to be a dialogue between faculty and students about their concerns, and a discussion of what support services would work better for them. The students need reassurance and ego boosts to help them through the nursing program. These educational programs are very strict and difficult. Often it is the first time the students have been in college and the pre-requisite courses do not mirror the nursing courses. Most nursing courses have an added clinical experience for 8 to 16 hours a week that puts an added burden on their personal time and family responsibilities. Many community colleges offer evening programs to assist is this matter and other colleges should consider more flexible programs.

Involving the family members in college fairs and college meet and greets along with the students and faculty can help family members to see the commitment that the Hispanic nursing students must have to be successful, and hopefully will instill more support for them. It will also assist the faculty to have a personal connection with the students’ family.

**Recommendations for Leadership and Change**

Nursing program administrators need to be more involved in the recruitment of Hispanic students. Since the goal of the nursing program is to educate and successfully graduate students who are eligible to become registered nurses it should be a major focus of the nursing program administrator to ensure that an adequate amount of diverse nursing students are in their programs, and successfully graduate then pass the NCLEX-
RN examination. It is highly suggested that nursing program administrators sit down and talk to their Hispanic nursing students or any student to maintain better communication with them and to learn about their concerns or needs. This communication would give the administration more of an understanding of Hispanic nursing students’ culture and educational needs. Administrators can exert transformational change and relay to the faculty the need to understand Hispanic students’ culture, their educational needs, and to provide more specific advisement. Requiring faculty to allow Hispanic students to record lectures, and to provide more hands-on application with lecture content, should be relayed by the administrator.

Transformative education “will not necessarily change the wider societal patterns of poverty and power but will acknowledge their existence and effect on students and will therefore make policies in schools that redistribute resources to correct inequitable outcomes” (Shields, 2010, p. 580). Nursing program administrators should transform the nursing programs and make them more equitable, inclusive, and socially just, while increasing Hispanic student recruitment and providing the necessary support services that they want and need (Shields, 2010).

The mission of HSIs is to serve the educational needs of the Hispanic population (Benitez & DeAro, 2004). Nursing program administrators can work with the admissions and financial aid offices to share financial opportunities with the Hispanic students. Grants and scholarships to financially help this population of students can also be sought from various external organizations.
My Transformational Leadership

Kinsler (2010) states, “Our work must also seek to produce change in the real lives of oppressed people everywhere, not just in educator’s attitudes, knowledge and theories” (p. 187). I plan to be an advocate for the Hispanic nursing student, publish this study for others to gain valuable knowledge, and share my study at informal or formal educational sessions. I will network with local middle and high school counselors, obtain grants to assist Hispanic students in their academic career, and provide support to Hispanic organizations on campus.

Social justice is also important to me. This was a key concept in the curriculum at Rowan University. I want the educational resources to be available to all students so they can have the opportunity for personal and professional development. Improvement in the recruitment and retention of Hispanic nursing students will help them to reach their goals and help society.

My Reflective Practice

When I reflect on my practice as an educator I will be more aware of the Hispanic culture and the students’ educational needs. “Reflective practice fosters learning by creating opportunities to become more aware of our practice” (Osterman & Kottkamp, 2004, p. 33). I will reflect on my position as an advocate and facilitator of their learning. Most of all I will dialogue with them. Dialogue enables “learners to clarify and deepen their understanding. When people have a chance to ask questions, to challenge ideas, and to process their learning verbally, they learn more” (Osterman & Kottkamp, 2004, p. 65).

As a researcher I know that I need to reflect on how I conduct research. I will investigate ahead of time potential study sites for their agreement in allowing external
researchers on their campus, and whether the sample population is available before starting a study of this nature. The study timeline cannot be too rigid, but must allow for flexibility, due to unforeseen challenges or obstacles along the way, such as IRB approval, and sample responding to surveys.

**Conclusion**

The Hispanic nursing students were very motivated and enthusiastic about sharing their perceptions. They wanted someone to listen to them in the hopes it would help other Hispanic nursing students by making changes in nursing education based on the research findings. It was awe inspiring to feel their caring attitudes during the focus groups and interviews. They took time out of their busy work and personal responsibilities to participate and none of them ever exhibited that they did not have the time to share.

I can only hope that I will make a change in the academic careers and future success of Hispanic nursing students by suggesting improvements in their colleges’ recruitment and retention strategies. As a transformative leader and educator I will work to ensure that all Hispanic nursing students have the best chance of becoming registered nurses and providing culturally competent care to Hispanic patients.
References


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Appendix A

Email Letter to Nursing Program Administrators

Dear Nursing Program Administrator,

I am a doctoral student at Rowan University, EdD in Educational Leadership. I would like to survey and have a focus group with some of the Hispanic nursing students at your college. My dissertation is Recruitment and Retention of Hispanic Nursing Students: Through the Lens of Nursing Program Administrators and Hispanic Nursing Students.

Is there a convenient time I may call you to discuss my project? I also would need to know who is the contact person for the IRB approval, if necessary, at your college.

Thank you for your time and I hope you can assist me with this important study.

Ms. Debra DeVoe, MSN, RN, EdD (c)
Appendix B

Rowan University IRB Approval

DHHS Federal Wide Assurance Identifier: FWA00007111
IRB Chair Person: Harriet Hartman
IRB Director: Sreekant Murthy
Effective Date: 4/10/2015

eIRB Notice of Approval

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<th>STUDY PROFILE</th>
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**Study ID:** Pro2015000293  
**Title:** Recruitment and Retention of Hispanic Nursing Students: Through the Lens of Nursing Program Administrators and Hispanic Nursing Students

| Principal Investigator: Carmen Jordan-Cox | Study Coordinator: None |
| Co-Investigator(s): Debra DeVoe | Other Study Staff: None |
Dear Nursing Students,

Hello. My name is Debra DeVoe. I have been a registered nurse for 38 years. My initial pre-licensure nursing degree was also from an associate’s in science nursing program similar to BCC. I teach fulltime in a diploma school of nursing in Camden NJ. I am currently attending Rowan University pursuing my doctorate in education (EdD) specializing in educational leadership in higher education. I am in the process of conducting research for my dissertation requirements for my EdD.

My dissertation is titled Recruitment and retention of Hispanic nursing students: Through the lens of nursing program administrators and Hispanic nursing students. This is valuable research for the health care system and nursing education. The Hispanic population will be thirty percent of the United States census in the year 2050. There is evidence in nursing and health care research that patients who are cared for by health care workers of the same culture have better patient outcomes. Currently the Hispanic RN population is approximately 3 % of all RN’s which is not enough for the current United States population and thus is certainly not enough for the increase in the Hispanic population that will need health care.

I plan to discover how associate degree nursing programs recruit Hispanic nursing students and what resources are used to retain the Hispanic nursing students to successfully graduate and then sit for the NCLEX-RN examination. The data that I collect and analyze may be used by various community colleges to recruit and retain more Hispanic nursing students and therefore, increase the number of Hispanic nurses in the nursing profession.

I hope you will be able to assist me with this research study. If you identify yourself as Hispanic and are interested in being a participant please email me. I would like to meet with at least five or more students on the BCC campus to have a focus group where I will ask questions and I will have students fill out a survey. I will offer a $10.00 Wawa gift card to each participant. You will sign an informed consent before participating. This process will not take longer than one hour. Your identification will not be revealed in the research findings or to your college. I have received approval by the NCC Institutional Review Board to conduct this research study on campus.

I hope you will consider helping me with this valuable nursing research. Thank you and good luck in your nursing career.

Regards,

Debra DeVoe, RN, MSN, EdD (c)
devoed59@students.rowan.edu
Rowan University EdD Student
Appendix D

Recruitment Flyer for Hispanic Nursing Students

HISPANIC NURSING STUDENTS SOUGHT FOR RESEARCH STUDY

Dissertation Title
Recruitment and Retention of Hispanic Nursing Students: Through the Lens of Nursing Program Administrators and Hispanic Nursing Students

Criteria: If you identify yourself as a Hispanic or Latino/Latina nursing student and would be willing to participate in a research study regarding recruitment and retention of Hispanic nursing students, please email devoed59@students.rowan.edu.

A focus group and a student survey will be conducted on your nursing program campus. This will take an hour of your time.

If you participate you will receive a $10.00 WAVA card.

Please consider participating in order to give your lived experiences as a Hispanic nursing student!
Appendix E

Online Nursing Program Administrator Survey

Rowan University

201 Mullica Hill Road
Glassboro, New Jersey 08028

You are invited to participate in this online research survey titled \textit{Recruitment and Retention of Hispanic Nursing Students: Through the Lens of Nursing Program Administrators and Hispanic Nursing Students}. You are included in this survey because you are a Nursing Program Administrator at a county college.

The survey may take approximately 15 minutes to complete. Your participation is voluntary. If you do not wish to participate in this survey, do not respond to this online survey. Completing this survey indicates that you are voluntarily giving consent to participate in the survey. We expect the study to last for 2-3 months.

The purpose of this research study is to discover how associate degree in nursing programs recruit and retain Hispanic nursing students. The study is a mixed methods explanatory sequential research design and will involve 15 ACEN approved associate degree programs from a mid-Atlantic state. The study will also comprise of a focus group and a survey with Hispanic nursing students on selected county college campuses.

There are no risks or discomorts associated with this survey. There may be no direct benefit to you, however, by participating in this study, you may help us understand in what ways can colleges increase their Hispanic nursing student population, as well as retain them, so more Hispanic nurses will be in the pipeline entering the nursing profession.

Your response will be kept confidential. We will store the data in a secure computer file and the file will destroyed once the data has been published. Any part of the research that is published as part of this study will not include your individual information. If you have any questions about the survey, you can contact me at the address provided below, but you do not have to give your personal identification.
Please complete the checkbox below.

To participate in this survey, you must be 18 years or older.

Completing this survey indicates that you are voluntarily giving consent to participate in the survey

Thank you for participating.

Debra DeVoe  Rowan University EdD Student
devoed59@students.rowan.edu
Version: 3/21/2015

### Demographic Information

1. **Is your college a designated Hispanic Serving Institution?**

   - [ ] No
   - [ ] Yes
   - [ ] Other (please specify)

2. **Do you provide special grants or scholarships to Hispanic nursing students?**

   - [ ] Yes (if so explain what type in the comment section)
   - [ ] No
   - [ ] Other (please specify)

3. **How may Hispanic students are admitted to your nursing program each year?**

   - [ ] 0-5
   - [ ] 6-10
   - [ ] 11-20
   - [ ] 21-30
   - [ ] Greater than 31 (please specify more specific number in the comment section)
   - [ ] Other (please specify)

4. **What is your Hispanic nursing student retention rate?**

   - [ ] Less than 25%
   - [ ] 50%
   - [ ] 75%
   - [ ] 100%
   - [ ] Other (please specify)
5. What is the average age of the Hispanic nursing student at your college?

- [ ] 18-25
- [x] 26-36
- [ ] 37-47
- [ ] Over 47

Other (please specify)

Questions

6. Do you observe challenges, barriers and obstacles in Hispanic nursing students?

- [ ] Never
- [ ] Rarely
- [ ] Sometimes
- [ ] Often
- [ ] Always

Other (please specify)

7. How often are you involved in recruiting Hispanic nursing students?

- [ ] Never
- [ ] Rarely
- [ ] Sometimes
- [ ] Often
- [ ] Always

Other (please specify)

8. How often does your faculty provide support services to the Hispanic nursing student?

- [ ] Never
- [ ] Rarely
- [ ] Sometimes
- [ ] Often
- [ ] Always

Other (please specify)

Questions

9. Do you think that the Hispanic nursing student would be more successful if they accepted more support services?

- [ ] Yes
- [ ] No

Other (please specify)

10. How often do the Hispanic nursing students at your college graduate?

- [ ] Less than 50% of the time
- [ ] 50-75% of the time
- [ ] 75% to 100% of the time

Other (please specify)

Open Ended Questions

11. Please comment to the best of your ability what you have observed as the biggest challenges, barriers and obstacles for Hispanic nursing students?
12. What has been the most successful means to recruit Hispanic nursing students to your college?

13. What has been the most successful means of retaining Hispanic nursing students at your college?
Appendix F

Student Survey

I am inviting you to participate in a research survey entitled “Recruitment and Retention of Hispanic Nursing Students: Through the Lens of Nursing Program Administrators and Hispanic Nursing Students.” I am inviting you because you are a Hispanic Nursing student at a county college. In order to participate in this survey, you must be 18 years or older.

The survey may take approximately 20 minutes to complete. Your participation is voluntary. If you do not wish to participate in this survey, do not respond to this paper survey. The number of subjects to be enrolled in the study will be 15.

The purpose of this research study is to discover how associate degree in nursing programs recruit and retain Hispanic nursing students.

Completing this survey indicates that you are voluntarily giving consent to participate in the survey.

There may be no direct benefit to you, however, by participating in this study, you may help us understand in what ways can colleges increase their Hispanic nursing student population, as well as retain them, so more Hispanic nurses will be in the pipeline entering the nursing profession.

Your response will be kept confidential. We will store the data in a secure computer file and the file will destroyed once the data has been published. Any part of the research that is published as part of this study will not include your individual information. If you have any questions about the survey, you can contact Debra DeVoe at devoed59@students.rowan.edu, but you do not have to give your personal identification.

Please answer the following demographic questions:

1. What is your age? ______
2. What semester of nursing school are you in (1st Semester, 2nd Semester, 3rd Semester or 4th Semester)? ______
3. Do you have another college degree? _____ If yes what is the degree? ______
4. Are you of the Hispanic Latino/a descent? Yes______No______
5. Were you born in the United States of America? ____Yes ____No
6. What Hispanic origin group do you identify with? (check one) 
   Mexican____  Cuban_____  Puerto Rican____  Salvadoran____  Dominican____ 
   Guatemalan____  Colombian____  Honduran____  Ecuadorian____  
   Peruvian____  Other______________

7. Are you a first generation college student? _____Yes _____No

8A. What categories below do you consider to be support services? Please check off those areas you feel are in this category.
   ____English as a second language (ESL)  ____Remediation to improve my grades 
   ____Tutoring of lecture content  ____Student Hispanic Organization 
   ____Review content prior to quiz/exam  ____Review after quiz/exam 
   ____Math tutoring  ____Test Taking Strategy Assistance 
   ____Advisement about my courses/progression in the nursing program 
   ____Mental Health Counselors 
   ____Other (specify) __________________________

Please answer the following questions based on the presented scale.

8. How many times did you seek support services in the last month?
   ___0 times   ___1-3 times   ___4-7 times   ___greater than 7 times

9. How many times did you seek support from your advisor in the last month?
   ___0 times   ___1-3 times   ___4-7 times   ___greater than 7 times

10. How many times have your family responsibilities prevented you from seeking support services in the last month?
    ___0 times   ___1-3 times   ___4-7 times   ___greater than 7 times

11. I would use academic support (such as, tutoring of lecture content, remediation of nursing concepts if unsuccessful on exams/quizzes) if the nursing faculty was available more days/times.
    ____Agree  ____Disagree

12. I would use academic support if the nursing faculty understood my personal needs.
    ____Agree  ____Disagree

13. What prevents you from seeking help? (Please check off all areas that are applicable.)
    ____Job Responsibilities _____Family Responsibilities _____Lack of self-confidence 
    ____Other (Please state reason) ____________________________________________
14. I was recruited to this nursing program by the following person:

_____Family   ____Friend   ____Advisor   ____Website   ____Other (title) ________

_____Nursing Program Recruiter   ____Classmate
_____Nursing Program Administrator (Dean, Chairperson, Director)

_____Not recruited (pursued the college on my own)

15. Please write any items you think would be helpful for this study about your experiences in being recruited and receiving support services at your college.

_________________________________________________________________________

Thank you for participating in this survey.

Debra DeVoe, MSN, RN
Appendix G

Informed Consent

CONSENT TO TAKE PART IN A RESEARCH STUDY

TITLE OF STUDY: RECRUITMENT AND RETENTION OF HISPANIC NURSING STUDENTS: THROUGH THE LENS OF NURSING PROGRAM ADMINISTRATORS AND HISPANIC NURSING STUDENTS

Principal Investigator: Dr. Carmen Jordan-Cox

This consent form is part of an informed consent process for a research study and it will provide information that will help you to decide whether you wish to volunteer for this research study. It will help you to understand what the study is about and what will happen in the course of the study.

If you have questions at any time during the research study, you should feel free to ask them and should expect to be given answers that you completely understand.

After all of your questions have been answered, if you still wish to take part in the study, you will be asked to sign this informed consent form.

You will be given a copy of the signed consent form to keep.

You are not giving up any of your legal rights by volunteering for this research study or by signing this consent form.

Why is this study being done?

Research in this study also will explore perceptions of the Hispanic students about the nursing programs that recruited them, what support services were effective or not effective and what they saw as the challenges, obstacles, and barriers to their success or lack of success.

Why have you been asked to take part in this study?

You have been asked to participate because being a Hispanic, Latino/a nursing student your perspective will be very beneficial to the study.
Who may take part in this study? And who may not?

Only Hispanic or Latino/nursing students will be allowed to participate in this study.

How long will my participation in this study take?

The study will take place on one given day. Each session will last approximately 1 hour.

Where will the study take place?

The study will take place on your campus in a classroom or a conference room.

What will you be asked to do if you take part in this research study?

You will complete a survey which will take 15 minutes to complete. The survey includes questions about the recruitment and retention measures done at your college. There are also demographic questions to answer about yourself. There will also be a focus group of about an hour in which you will be audio taped. This audio taping is for data analysis purposes only. Participation in this study is voluntary. The only alternative to this study is not to participate.

What are the risks and/or discomforts you might experience if you take part in this study?

There are no risks anticipated from taking part in this study. If you feel uncomfortable with a question, you can skip that question or withdraw from the study altogether. If you decide to quit at any time before you have finished the questionnaire your answers will NOT be recorded.

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

The benefits of taking part in this study may be that your perspective on recruitment and retention of Hispanic nursing students will help increase the number of Hispanic registered nurses.

However, it is possible that you might receive no direct personal benefit from taking part in this study. Your participation may help us understand which can benefit you directly, and may help other people to receive culturally competent health care from someone of their own culture.

What are your alternatives if you don’t want to take part in this study?

There are no alternative treatments available. Your alternative is not to take part in this study.
How will you know if new information is learned that may affect whether you are willing to stay in this research study?

During the course of the study, you will be updated about any new information that may affect whether you are willing to continue taking part in the study. If new information is learned that may affect you, you will be contacted.

Will there be any cost to you to take part in this study?

There are no monetary costs.

Will you be paid to take part in this study?

You will receive a $10.00 Wawa card for taking part in this study.

How will information about you be kept private or confidential?

All efforts will be made to keep your personal information in your research record confidential, but total confidentiality cannot be guaranteed. Your personal information may be given out, if required by law. Presentations and publications to the public and at scientific conferences and meetings will not use your name and other personal information. This survey is confidential. The survey will be placed in an envelope separate from the informed consents. Your name will not be identified on the audio taping device. We will not be able to identify you. Only Debra DeVoe and the principal investigator and the data analyst will have access to the data.

What will happen if you are injured during this study?

There is no anticipated chance of injury by participating in this study.

What will happen if you do not wish to take part in the study or if you later decide not to stay in the study?

Participation in this study is voluntary. You may choose not to participate or you may change your mind at any time.

If you do not want to enter the study or decide to stop participating, your relationship with the study staff will not change, and you may do so without penalty and without loss of benefits to which you are otherwise entitled.

Who can you call if you have any questions?

If you have any questions about taking part in this study or if you feel you may have suffered a research related injury, you can call the principal investigator Dr. Carmen Jordan-Cox at 856-256-4305. If you have questions about your rights as a research subject, please contact the Rowan University Institutional Review Board for the
What are your rights if you decide to take part in this research study?

You have the right to ask questions about any part of the study at any time. You should not sign this form unless you have had a chance to ask questions and have been given answers to all of your questions.

AGREEMENT TO PARTICIPATE

I have read this entire form, or it has been read to me, and I believe that I understand what has been discussed. All of my questions about this form or this study have been answered.

Subject Name: 

Subject Signature: ___________________________ Date: ____________

Signature of Investigator/Individual Obtaining Consent:

To the best of my ability, I have explained and discussed the full contents of the study including all of the information contained in this consent form. All questions of the research subject and those of his/her parent or legal guardian have been accurately answered.

Investigator/Person Obtaining Consent: 

Signature: ___________________________ Date: ____________
Appendix H

Audiotape Consent

You have already agreed to participate in a research study conducted by Debra DeVoe, EdD doctoral student at Rowan University and Principal Investigator Dr. Carmen Jordan-Cox. We are asking for your permission to allow us to audiotape as part of that research study. You do not have to agree to be recorded in order to participate in the main part of the study.

The recording(s) will be used for analysis by the research team. The recording(s) will include just your voice and no personal identifiers, such as your name or the school you attend.

The recording(s) will be stored to protect subject’s privacy in a locked file cabinet with no link to subjects’ identity and will be retained upon completion of the study procedures and destroyed upon publication of study results.

Your signature on this form grants the investigator named above permission to record you as described above during participation in the above-referenced study. The investigator will not use the recording(s) for any other reason than that/those stated in the consent form without your written permission.

Contact Information:
If you have concerns or questions about this research study please contact the Principal Investigator Dr. Carmen Jordan-Cox at 856-256-4305. If you have questions about your rights as a research subject, please contact the Rowan University Institutional Review Board for the Protection of Human Subjects Office of Research, 201 Mullica Hill Road, Glassboro, NJ 08028-1701 Tel: 856-256-4058.

Agreement to participate:
I have read this entire form, or it has been read to me, and I believe that I understand what has been discussed. All of my questions about this form or this study have been answered.
Participant Name_________________________
Participant Signature_____________________ Date___________
**Signature of Investigator/Individual Obtaining Consent:**

To the best of my ability, I have explained and discussed the full contents of the study including all the information contained in this consent form. All questions of the research subject have been accurately answered. Investigator/person Obtaining Consent:

___________________________

Signature: ____________________ Date__________________
Appendix I

Student Focus Group Questions

Hispanic Nursing Student Focus Group

These are questions being asked in the focus group. The focus group is audio taped. The lines on this document are in case the researcher wants to record any field notes.

1. In your most recent classroom experience were you an ethnic minority?
   ____Yes _____No

2. What percent of Hispanic nursing students are in your class? (Pick the percentage closest to the correct number.)
   ____less than 10% (1/10 of the class) ____25% (1/4 of the class) ____50% (1/2 the class) ____75% (3/4 of the class) ____100%

3. Has your ethnic background impacted your learning or academic success?
   ____Yes ____No
   If yes please explain.

4. Who has provided your main support system during your college years? (Such as: family, parents, siblings, friends, spouses, college personnel, etc). You may state more than one.

5. Please explain how you engage with other non-Hispanic students. If you do not engage with them, please explain why you do not.

6. During your college experience have faculty been supportive of you?
   ____Yes ____No
   Please explain how they have been supportive or how they have not been supportive.

7. Do you feel that there are stereotype attitudes about Hispanic students at your college?
   ____Yes ____No
   If yes, please explain what they are and how does that make you feel?
8. Explain what are the best ways for you to learn (such as lecture, hands-on application of theory, group activities, case studies, developing care plans, simulation with live actor patients or high-tech mannequins, etc.)

9. Explain some barriers other Hispanics students might have that would prevent them from applying to nursing school.

10. If you could share anything with your college administrators, faculty or a prospective nursing student, that would be helpful for the Hispanic nursing student to be recruited and successfully graduate at your college, what would it be?

Thank you for your input into this important research study.

Debra DeVoe, MSN, RN
EdD Doctoral Student
Rowan University

Revised 3/21/15 djd/cjc