

# **The importance of diversity & inclusion in the nursing workplace**

## **I. Introduction**

Thank you for the invitation to speak to this distinguished group, the Council of the Tennessee Organization of Nurse Executives. As nurse executives you play an important role in establishing priorities and setting the tone for the nursing profession.

The face of the country is changing, yet economic and social inequities among racial and ethnic groups persist. While progress has been made, historical and current patterns of discrimination, segregation and racism continue to foster disparities that make it increasingly difficult for people of color to achieve at the same rates as others.

People of color are disproportionately poor, have less access to quality education, less access to quality health care, and are underrepresented in positions of power and influence. Without intentional and focused efforts to address inequality in our society, the gaps will only continue to grow.

Today I will speak about the meaning of diversity and limitations within current definitions. Then, I will focus on diversity challenges within the nursing workforce—specifically racial diversity—and strategies for overcoming these challenges. And, in closing, I will briefly mention ways to lead from where you are positioned in the organization.

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The rapidly changing demographics and economics of our increasingly diverse and global world, and the long-standing disparities in the health status of people from racial and ethnic backgrounds have long challenged health care providers and organizations to consider making diversity and inclusion priorities. However, diversity is an issue that still perplexes most companies, institutions, and organizations. That perplexity begins actually with articulating the *meaning of diversity*.

## **II. What does diversity mean to you?**

Diversity is a word that means different things to different people. How we view the word has everything to do with where we grew up, what we've been exposed to, where and how we were educated, and where we currently live.

For example, I grew up and spent most of my professional career in the Midwest where there are many more American Indians and newer immigrant groups than in East Tennessee. Because of my background, for me personally, I think about and talk about diversity, especially racial diversity, differently than a lot of people who have been born, reared, and educated in this region of the country.

In terms of my understanding of diversity in a professional capacity, it is very important that diversity be understood in broad and complex terms, as embracing multiple, shifting, and hyphenated identities that include not only race and ethnicity but also gender and gender expression, sexual orientation, disability, age, social economic status, and religion—just to name some of the aspects of diversity.

And, it's important that diversity be understood as going beyond access. What I mean by that is that over the course of time, our society has developed mechanisms for historically marginalized folks to gain access to services and professions. Now, we must ask ourselves questions about culture and inclusion. What does it mean on a cultural and societal scale to have provided access to all industries and professions, but not be welcoming and supportive those that have arrived? What does a truly inclusive organization that allows people to be all of who they are look like? How do we show our colleagues they do not have to leave parts of their identities at the door?

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### **III. Racial Diversity in the Nursing Workforce**

While it is important to understand diversity broadly, sometimes there is a need to focus. Typically when talking about diversity in the health professions I focus on racial and gender diversity. In general, women and people of color are underrepresented in the health professions. However, nursing is a profession where women are not underrepresented. For that reason, today my focus will be on racial diversity in the workplace.

The nursing profession has had some success in increasing the numbers of nurses of color. However, while the numbers have increased, the proportion of nurses from communities of color remains below their percentages in the U.S. population. We also know that people of color are not equally represented, especially at the highest echelons and positions of leadership. Of course, this shouldn't be a shock as leadership is drawn from those in the field who have come up the ranks.

Why is this topic, diversity in the nursing workforce, so important? The topic is important because workforce diversity affects health care access, delivery, and quality. Let me reference two seminal reports, of which I'm sure most of you, if not all of you, are aware.

The first is **Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care** (2002). This report states that a consistent body of research demonstrates significant variation in the rates of medical procedures by race, even when insurance status, income, age, and severity of conditions are comparable. *This research indicates that U.S. racial and ethnic minorities are less likely to receive even routine medical procedures and experience a lower quality of health services.* One of the key recommendations in the study was a need for more health care providers of color because these providers are more likely to serve in minority and medically underserved communities. The report also recommended there be more interpreters available in clinics and hospitals to overcome language barriers that may affect the quality of care.

**Missing Persons: Minorities in the Health Professions** (2004) is the second report. A commission chaired by Louis Sullivan, former Secretary of Health and Human Services, generated the report. The Sullivan Commission on Diversity in the Healthcare Workforce found that African Americans, Hispanics, American Indians, and certain segments of the nation's Asian/Pacific Islander population are not present in significant numbers as doctors, dentists, and nurses. Rather, they are missing! They are just not there. The report, **Missing Persons**, examines the root causes of the underrepresentation of people of color in those professions and provides recommendations on how to increase the representation of minorities in the nation's medical, dental, and nursing workforce. **Missing Persons**, like **Unequal Treatment**, points out that *this underrepresentation contributes to the gap in health status and access to health care* for minority and medically underserved communities.

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This is of the utmost importance. These communities don't have consistent access to routine health care and don't receive quality treatment when they do receive medical procedures. If we do not diversify the health professions, society will pay the ultimate price because for many, access to routine health care is a matter of life and death. And consider this, even in the case of life, the quality of that life is impacted.

Who here is familiar with the term "microaggressions"? Racial microaggressions are brief and commonplace indignities, whether intentional or unintentional. They communicate hostile, derogatory, or negative slights and insults toward people of color.

There is a growing body of literature in the psychology discipline about the effect of racial microaggressions on mental health. People of color who experience greater amounts of racial microaggressions are more likely to suffer from depression, negative emotions, and poor self-concepts.

Think about this racial microaggression research in conjunction with the **Unequal Treatment** publication. Consider the likelihood that people of color experience racial microaggressions when they receive low-quality health services. I believe there is a high likelihood. I believe that the lack of diversity in the health professions negatively impacts *both* the physical and mental health of underserved communities.

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#### **IV. Strategies to Increase Racial Diversity in the Workplace**

I could talk more about problems and challenges associated with the lack of diversity in nursing, however, as leaders in the profession you are well aware of those things. So, let me share some potential strategies for addressing the problem.

*The first strategy is developing a well-prepared pool of applicants.*

In order to recruit more nurses of color, you must have a well-prepared pool of applicants. In order for that to happen, colleges and universities have to do a better job of recruiting diverse and talented student bodies, and so on.

I've talked about the shifting demographics that are taking place. With demographic shifts come increases in the percentage of students who will be graduating from high school from groups that historically have had the least access to and success in higher education.

If nursing is to have a diverse and talented pool of applicants from which to recruit, students from these populations must gain access to higher education at higher rates and be given the necessary support to succeed.

One strategy to generate a well-prepared nursing applicant pool is to actively work in partnership with PreK-12 educators, higher education institutions, community organizations, the corporate sector, and others to increase the number and diversity of Tennessee students who graduate from high school with the knowledge, skills, and habits for success in higher education.

This sort of partnership may be outside of your comfort zone. But a partnership of this nature could—for example—create an initiative for pre-collegiate outreach programs that introduce students of color and girls to STEM and the health professions in elementary, middle, and high school.

I mention STEM specifically because a strong background in these disciplines—science, technology, engineering, and mathematics—is the basis for success in the health professions. We know that in terms of the STEM disciplines, the fire has to be lit at an early age and then regularly stoked.

I realize that with limited resources it's a challenge to engage this far back in the pipeline. *But if we don't make the investments we won't see the dividends later.* For that reason it is extremely important to advocate for and invest in educational partners to develop these types of programs and initiatives.

Another possibility is for the nursing profession and Schools of Nursing to build partnerships with health and/or STEM-focused schools and community organizations. A partnership of this type may lead to a mentoring initiative. It is important that young people have opportunities to interact with faculty, students, and professionals in nursing and other health-related areas. It is

even more important that young people fully understand what it takes to be successful in nursing and other health professions, like taking rigorous math and science courses during K-12.

Truly, through partnerships that extend your capacity, the possibilities become numerous. Might there be a “Pathway into Nursing” initiative between targeted racially diverse high schools, community colleges, four-year institutions, and a hospital or medical center? As long as the students followed the “pathway,” met all criteria, and graduated, they would be guaranteed a nursing position with the hospital or medical center.

I mention community colleges because they serve approximately 45% of postsecondary students in the United States. Governor Haslam’s launch of several initiatives that focus on partnerships with community colleges, like Drive to 55, Tennessee Promise, and Tennessee LEAP, exhibit the importance of community colleges being an essential partner in addressing workforce challenges.

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*The second strategy is about providing support.*

In my experience in higher education and working with students pursuing degrees in health areas, funding and academic support are extremely important. These are areas nursing professionals and granting agencies can assist with.

You may know that my background is in public health. I have known a number of students who had to work a significant numbers of hours while also pursuing a challenging health sciences degree. Some students did well, and others not so well. One thing I believe to be true is that *all* of these students would have done much better if they hadn’t had to work so many hours and had more time to focus on their studies.

Creating scholarship programs and other funding opportunities for those underrepresented in nursing is extremely important to diversifying the nursing workforce.

Kathy Kenwright and Linda Pifer, two medical laboratory science faculty members at the UT Health Science Center saw this same problem too. A significant number of their African American medical laboratory science students had to work so many hours to provide for their family and education, that they could not devote enough time to maintain the level of academic success required to stay enrolled in their department.

These two faculty members sought and were awarded \$15k in grant funding to provide scholarships to fourteen African American women that cover the students' books, medical laboratory apparel, and the Board of Registry exam. Eight of these students are on track to graduate with 'A' or high 'B' average and the other four students have already graduated and successfully passed their Board of Certification exams. Additionally, three of them are now employed in laboratories in Tennessee.

These faculty members' effort shows immediate, meaningful change in the lives of these fourteen students, the racial diversity in the health professions workforce, and the racial diversity of Tennessee's workforce.

In addition to developing support efforts specific to your own context, I encourage you to look to national agencies and organizations. I know that HRSA has the Nursing Workforce Diversity grant that provides student stipends or scholarships for individuals who are from "disadvantaged backgrounds, including racial and ethnic minorities that are underrepresented among registered nurses." Although small in number, I believe there must be other opportunities of this nature available.

In addition to finding and creating funding opportunities for nursing students, we need to have academic support available.

In terms of support, mentors are a critical link. It is important to connect undergraduate students of color with mentors on and off campus. This allows students to learn more about the mentors' areas of expertise, the mentors' career trajectory, and to seek advice and encouragement.

Additionally, once these students of color enter the workplace, the support cannot dwindle. We need to actively nurture their professional growth by making sure they are connected to informed, professional mentors inside and outside their place of work. Some argue that even more important than hiring

diverse professionals is the mentoring support programs necessary to retain them. It is through these mentoring relationships that many new professionals learn the “unwritten rules” of an institution and how to successfully negotiate within these rules.

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*The last strategy to increase racial diversity that I will speak about is diversity education and training.*

In order to have success in diversifying the nursing workforce, the nursing profession and medical centers must invest in diversity education and training. All employees must have a fundamental understanding of the value of a diverse workforce. That comes through training, exposure, and lived experiences.

I can think of two educational efforts happening at UT that are impacting our community’s understanding and practice of diversity and inclusion.

One such effort is called STRIDE@UT. This is a faculty-led initiative to revitalize efforts to hire and retain a diverse faculty. This group conducts research on bias, microaggressions, and diversity, and then uses peer-to-peer instruction to educate colleagues about bias in the recruitment and hiring process.

I think the main reason this effort is impacting our campus because it was undertaken by “on-the-ground faculty.” What I mean by that is that my office, the Office for Diversity and Inclusion, did not lead this effort. The Office of the Provost did not lead this effort. The Chancellor did not lead this effort. This effort came from faculty across the university—physics, social work, law, engineering, etc—that saw the real need to diversify their departments. In efforts to do so, they were confronted with implicit biases about women, people of color, people that identify as LGBTQ, veterans, and others. Once they saw this problem, they took it upon themselves to fix it by creating the STRIDE@UT initiative.

When employees from diverse backgrounds see a cohort of their peers valuing and prioritizing diversity in the workforce, that has the power to positively impact their perceptions of inclusion and workplace culture. Welcoming and

inclusive work culture and environments will undoubtedly help retain diverse employees.

In addition to educating colleagues and peers about biases, it is important to have infrastructure that continues that educational development. What I'm talking about here is ally development.

UT has Safe Zone training for students, faculty, and staff. The purpose of this training is to improve the visibility and support for LGBTQ students and employees. Participants in the training should leave as informed allies with a commitment to providing safe space for and celebrating the contributions of LGBTQ individuals and communities.

This program has been in existence for quite some time, but in the past year we have seen remarkable growth. For example, one of our colleges has every graduate assistant attend Safe Zone training. Another college has had every faculty member attend Safe Zone training. This type of educational training program ends up generating a wider net of allies and support systems across our institution for individuals from diverse backgrounds.

Allies who publicly speak out and challenge discrimination show short- and long-term success in changing the minds of previously biased individuals.

I mention Safe Zone simply as an example. This type of training does not have to be solely focused on LGBTQ individuals. You could certainly develop other types of ally and support trainings that focus on how to create and sustain safe spaces for people of color.

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## **V. Lead from Where You Are (in your organization)**

I've shared some thoughts, which hopefully will help you all generate additional ideas, ones that you will act on.

Organizations have a very real responsibility in advancing diversity and inclusion. As executives, this responsibility falls on your shoulders. How do you act on that responsibility? How does an organization show a real commitment, and not just a stated one? Three ideas came to mind:

1. The Chief Executive can include a commitment to diversity and inclusion in their annual goals and objectives, and outline annual expectations for achieving greater diversity and inclusiveness in each unit.
2. The organization can celebrate and reward departments and units that are successful in advancing diversity and inclusion. This can also serve as an incentivizing process for other departments and units.
3. The organization can institute a zero-tolerance policy for acts of discrimination.

However, if you really want to see gains made in this area, I believe diversity and inclusion must first be a part of the performance review process, and then also be tied to the budget and merit process.

The late Frank Hale, Jr., former Vice Provost for Minority Affairs at The Ohio State University used to say, “Commitment without Cash is Counterfeit.” Essentially what he was saying is if there isn’t sufficient resources devoted to diversity, both human and financial, then this work is not a priority for the institution or organization.

I would venture to say that if a portion of budget increases and/or senior leaders’ compensation were linked to improving diversity in units we would see substantial movement and creative approaches to addressing this issue.

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## **VI. Conclusion**

Thank you all for your time today. I hope that by sharing with you how I define diversity personally and professionally will help expand your own conceptions of diversity. I also hope that the strategies for increasing racial diversity in the nursing workforce inspire you all to generate ideas specific to your organizations and to have meaningful discussions with senior leadership about how your organization exhibits diversity and inclusion as core values.

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Nelson Mandela said “Education is the most powerful weapon which you can use to change the world.”

I truly believe that. Educating ourselves about the meaning and value of diversity is the only mechanism that will overcome historical and current patterns of discrimination, segregation, and racism.

I'm grateful that Tennessee's nurse executives are genuinely interested in diversifying the workforce. I hope this morning has been educational and encouraging.

Thank you again for the invitation to be with you this morning.