



Spring 5-15-2021

Enhancing Diversity In Nursing Education

Ellen Steidl
University of North Dakota

[How does access to this work benefit you? Let us know!](#)

Follow this and additional works at: <https://commons.und.edu/nurs-capstones>



Part of the [Nursing Commons](#)

Recommended Citation

Steidl, Ellen, "Enhancing Diversity In Nursing Education" (2021). *Nursing Capstones*. 331.
<https://commons.und.edu/nurs-capstones/331>

This Independent Study is brought to you for free and open access by the Department of Nursing at UND Scholarly Commons. It has been accepted for inclusion in Nursing Capstones by an authorized administrator of UND Scholarly Commons. For more information, please contact und.common@library.und.edu.

ENHANCING DIVERSITY IN NURSING EDUCATION

by

Ellen L. Steidl

Bachelor of Science in Nursing, University of North Dakota, 2014

An Independent Study

Submitted to the Graduate Faculty

of the

University of North Dakota

in partial fulfillment of the requirements

for the degree of

Master of Science

Grand Forks, North Dakota

April

2021

PERMISSION

Title Enhancing Diversity in Nursing Education

Department Nursing

Degree Master of Science

In presenting this independent study in partial fulfillment of the requirements for a graduate degree from the University of North Dakota, I agree that the College of Nursing of this University shall make it freely available for inspection. I further agree that permission for extensive copying or electronic access for scholarly purposes may be granted by the professor who supervised my independent study work or, in her absence, by the chairperson of the department or the dean of the Graduate School. It is understood that any copying or publication or other use of this independent study or part thereof for financial gain shall not be allowed without my written permission. It is also understood that due recognition shall be given to me and to the University of North Dakota in any scholarly use which may be made of any material in my independent study.

Signature Ellen Steidl

Date 4/27/21

Abstract

Diversity in the nursing workforce lags behind the demographic of the national population; therefore, diversity of the student population must be enhanced in nursing education. While racial minority groups account for 40% and men account for 50% of the total population, only 20% of racial minority groups and 9% of men are represented in nursing. The Transcultural Nursing Theory serves as the theoretical framework for this study. A thorough review of the literature was conducted and analyzed. Several barriers to achieving diversity in nursing education exist including issues with recruitment and retention of diverse populations. Strategies for effective implementation techniques in the classroom will be discussed. Results revealed a need for faculty development, cross cultural mentorship, social, financial, and academic support, as well as institutional policy change in order to enhance diversity in the nursing workforce. More research is needed to develop strategies to effectively accommodate multiple diverse populations in the classroom simultaneously.

Keywords: nursing education, diversity

Enhancing Diversity in Nursing Education

Take a walk into any healthcare facility across the United States (U.S.) and you may notice a nursing workforce predominated by white females (Robert Wood Johnson Foundation, 2011). According to United States Census Bureau (2019), the U.S. population is comprised of roughly 50% males and 40% racial minority groups. However, men constitute 9% of the nursing workforce and racial minority populations amount to just under 20% (American Association of Colleges of Nursing [AACN], 2019). Diversifying the nursing workforce to match the diversity of those served is of utmost importance in order to improve quality and access of care (Spencer, 2020). Therefore, the research topic in question is what actions can higher education institutions implement to enhance diversity in nursing education.

In order to enhance diversity in the healthcare systems, diversity must first be enhanced in nursing education. The AACN has identified three goals to advance diversity, equity, and inclusion in nursing education which includes: improving the quality of education, addressing pervasive inequities in healthcare, and enhancing civic readiness and engagement potential of nursing students (AACN, 2017). The AACN (2017) references diversity broadly and includes “individual, population, and social characteristics, including but not limited to age, sex, race, ethnicity, sexual orientation, gender identity, religious beliefs, and socioeconomic status” (para. 2). Enhancing diversity in academic nursing improves socialization and perceptions, and has intellectual and cognitive benefits (AACN, 2017).

Purpose

In the past decade, significant strides have been made toward admitting and graduating diverse student populations. However, there is still work to be done until the nursing workforce matches the diversity of the U.S. population. A review of the literature regarding diversity in

nursing education reveals insufficient efforts to diversify its student population to mirror that of our nation. The literature identifies and discusses several key strategies to promote diversity within nursing education. The following paper will discuss possible strategies for implementation focusing on the admission process, teaching strategies, academic and support services, as well as cultural competency training.

The aforementioned strategies are not difficult strategies to conceptualize, but there are several barriers that complicate effective implementation. While some barriers involve policy and process change, others are more challenging to overcome. Humans naturally have intrinsic attitudes, values, and biases towards cultural groups different from their own. While these differences may not be expressed intentionally, these unconscious differences create barriers in education. Other barriers are more obvious and include language and cross-cultural communication barriers (Bednarz et al., 2010).

Theoretical Framework

“Nursing theories provide the foundation for nursing practice” (Gaines, 2020, para. 6). Madeleine Leininger developed the Transcultural Nursing Theory which focuses on the notion that different cultures have different caring behaviors and different health and illness values, beliefs, and patterns of behaviors. The theory provides cultural meaning in relation to care and health. Nursing care decisions should involve cultural preservation and accommodations. Therefore, nurses must not separate worldviews, social structure, and cultural beliefs from health and illness, as the factors are closely associated (Gonzalo, 2019).

The Transcultural Nursing Theory is highly generalizable so it is not only applicable in the clinical setting, but also in the academic setting. Just as nurses should be aware of their client’s cultural values, beliefs, and practices, so should nursing education faculty be cognizant

of their students. The Transcultural Nursing Theory will serve as the theoretical framework for enhancing diversity in the academic setting. The theory encompasses all aspects of cultural and social structure (see Appendix A), which makes it comprehensive and inclusive for all student and/or client populations.

Major assumptions of the theory include culture care, culture care diversity, and culture care universality, which summarizes how humans all have care as a universal need, but how that care is valued and perceived may vary among diverse groups. This translates into higher education in that the student is synonymous with the client as the nurse is to the faculty member. The nursing students all have a common goal of being registered nurses, but have diverse needs, learning styles, values, beliefs, and practices. Nursing faculty must have the competence and awareness to meet the diverse needs and learning styles of their students.

Significance

The nursing workforce demographic lags behind the national demographic (AACN, 2019). This poses a serious problem as healthcare is compromised for persons of diverse groups. There is a strong correlation between a culturally diverse workforce and ability to provide quality, culturally competent care (AACN, 2019). The solution to the problem is to enhance diversity in nursing education, yet the solution is not that simple.

Several barriers have been identified in the literature as to why the nursing workforce remains predominantly white, females. Barriers include recruitment and retention of minority groups into nursing. According to Green (2020) ethnically diverse students are more likely to come from low-income homes, and therefore grade-point averages and literacy rates may be lower due to lack of resources. Additionally, standardized test scores, drop-out rates, lack of family support, and access to health care further hinder admission (Green, 2020). Nursing

faculty, who are majority white, females, are often unaware of these inequities and challenges minority students face. Therefore, teaching styles, and evidence-based strategies for success are lacking, which leads to the second barrier of retention in nursing school.

Several challenges exist within the nursing program that can hinder academic success in minority groups such as inadequate academic preparation, social isolation, lack of mentors or peer support, experiences with discrimination, language barriers, and ill-equipped faculty members (Bristol et al., 2020). The literature highlights several of these issues over and over, but little research exists as to how to effect change and breakdown these barriers. Several ideas have been proposed including culturally congruent mentors or role models, integration of cultural competence and acknowledgement of values and beliefs in the classroom inclusive imaging, creation of welcoming environment, and equal opportunity involvement (Garneau, 2016) (McNally et al., 2019). While the research provides several ideas for implementation, there is a gap in how to implement these ideas in the classroom. Additionally, it is highly unlikely that nursing faculty will only have one underrepresented population in their classroom at a time.

This study compiles research on several diverse groups including racial/ethnic groups, gender minority groups, and groups with functional, intellectual, or emotional disabilities, which the literature has not previously done. The importance of including all diverse groups in this study is that nursing faculty will likely never experience one group in isolation, so they are going to need the tools to create a learning environment in which every student has opportunity for success. If change is needed in the nursing workforce, change must first start in education, so faculty need to be ready and prepared.

Review of the Literature

The Robert Wood Johnson Foundation (2011) issued a call to action for systematic changes to nursing education programs to recruit and advance nursing students from diverse backgrounds. As the U.S. population becomes increasingly more diverse, enhanced diversity in nursing will foster interaction and communication with patients from a variety of backgrounds (Robert Wood Johnson Foundation, 2011). The following section will review existing research, identify gaps in the research, as well as highlight strengths and limitations of the current literature in regards to enhancing diversity, equity, and inclusion in nursing education.

Prior to reviewing the literature, there are some key concepts that must be defined to provide clarity and consistency among works cited. As previously stated, diversity includes a broad range of characteristics including but not limited to age, sex, race, ethnicity, sexual orientation, gender identity, and physical, functional, and learning abilities. The term inclusion is defined as a culture where persons with diverse characteristics can thrive and succeed. Finally, the term equity is described as the ability to recognize differences in knowledge and resources needed to allow individuals to fully participate in society (AACN, 2017). Equity, different from equality, recognizes that individuals have different needs and require different resources to succeed rather than distributing resources exactly the same among populations (refer to appendix B). It is important to note that several of the studies reviewed in this paper include small sample sizes, which is representative of how small diversity populations are in nursing programs.

The literature was found through review of the database, Cumulative Index of Nursing and Allied Health Literature (CINAHL), which contains articles specific to medicine and nursing literature. Specific journals were also reviewed including *Journal of Nursing Education*, *Teaching and Learning in Nursing*, and *Nursing Education Practice*. The selected database and

journals were accessed through the University of North Dakota's School of Medicine and Health Sciences. These particular journal were selected because they focus specifically on nursing education. The following keywords including *diversity* AND *nursing education* were utilized, which yielded 2,450 articles. Inclusion criteria included geographic location (U.S. based), year (2015 or newer), peer-reviewed, full-text available, and language (English). Exclusion criteria included editorials, and hospital or clinical based studies. The criteria narrowed the article number to 74 for review. Of the 74 articles, 30 articles were relevant to the question context, and ultimately narrowed down to 10 articles for the literature review, as they encompass multiple perspectives of the question.

A qualitative phenomenological study explored the experience of 20 nursing students participating in an immersive service-learning experience in Mexico. Four themes emerged from the analysis of the participants' experience and include the value of communication, importance of understanding differences, need for education, and appreciation of humanity. Student biases were explored before and after the experience. The immersive experiment was effective in enhancing cultural sensitivity and competence for nursing students (Mitchell-Brown, 2020). While the study was an effective tool for enhancing cultural competence, it may be difficult for several programs to incorporate such an experience in their curriculum given the additional expenses and resources required to implement this.

Another phenomenological study explored the lived experiences of 10 Hispanic nursing students enrolled in a baccalaureate program at a private liberal arts college. Students reported feeling unprepared, unwelcomed or not worthy, and isolated. Students also reported challenges with finding support, trying to fit in, balancing school and family life, and trouble understanding resources. These sorts of issues led to difficulties adjusting academically, socially, and

emotionally in the program. Nursing educators need to be accountable and committed to addressing this problem. The study highlights the need for faculty to foster inclusion and equity within their curriculums. All faculty should be offered guidance and training on effective ways to incorporate cultural content within their curriculums. Energy should be focused on improving the culture as a whole on campuses as well (Alicea-Planas, 2017).

Englund (2018) explored the correlational relationship between marginality and minority status in undergraduate nursing programs in the Midwest. A nonexperimental study examined 331 nursing students who completed a demographic survey and compared these variables in relation to marginality. Nurse educators have the ability to influence student understanding of cultural competence, as well as foster a welcoming environment. Marginalization was correlated to racial/ethnic minority students, lesbian, gay, bisexual, transgender, queer (LGBTQ) minority students, gender minority students, and nontraditional-aged students. While continuous efforts towards diversifying the nursing profession have been made nationally, the profession is still severely lagging behind the populations being served.

A secondary data analysis of a national cohort of underrepresented minority (URM) nursing students examined which psychological, social, and cultural factors predicted first-time NCLEX pass rates and program satisfaction (Williams et al., 2018). The sample size included 2,250 non-white nursing students, majority female. Variables that contributed to NCLEX pass rates include faculty advisement, quality of interactions with faculty, and perceived barriers. Satisfaction with the program was related to faculty diversity representation, including male and racially diverse faculty. Williams et al. (2018), suggests that success of URM students in nursing school influences positive health care outcomes.

Adult learning is transformed when the learner becomes critically reflective of their assumptions. Therefore, critical reflection could be a strategy to promote changes in nursing practice. Garneau (2016), developed a framework for critical reflection in cultural competence evolution in undergraduate nursing students. Faculty can play a role in this evolution by fostering or inhibiting effect on students' reflection. The behavior of the teacher is critical to the development of the learner. The faculty member has the ability to foster learning by creating a welcoming, open environment with equal opportunity for involvement. The critical reflection framework can serve as a guide for implementation of cultural competence development in the classroom (Garneau, 2016).

McNally et al. (2019) conducted a literature review limited to studies that proposed interventions and strategies to support the success of diverse student populations in nursing. Key themes of the study included cultural values and beliefs (learned biases and behaviors), academic factors (curriculum and learning activities), professional integration (formal and informal interactions between students and faculty), and environmental factors (financial status, family support and responsibilities). The review concluded that nontraditional students were more likely to be successful when cultural values and beliefs were acknowledged and incorporated into the curriculum. The goal of educators should be to foster a classroom that promotes retention and success of nontraditional students.

A mixed-methods study compared perceptions of 13 diverse nursing students with 22 nurse educators regarding the learning environment in a baccalaureate nursing program. The study concluded perceptions of the learning environment did not align between the two groups. The students saw the biggest barrier of the learning environment was lack of relationships between faculty and students. Whereas, the faculty reported the biggest barrier being language

proficiency. Faculty are discouraged from making assumptions about diverse students and encouraged to make a deliberate effort to recognize differences (Fuller & Mott-Smith, 2017). This study is particularly helpful in pointing out perceptual differences between students and faculty, which can aid faculty in improving the learning environment to promote student success.

A majority of research has focused on racial and ethnic populations, but little attention has been given to two other diverse groups including men and persons with functional, emotional, or learning disabilities. Current challenges for men in nursing include gender-related stereotypes, gender bias of teaching and text materials, and lack of male role-models in the profession (Petges & Sabio, 2020). Petges and Sabio (2020), conducted a phenomenological of 13 male nursing students to explore the reasons why men enter the profession of nursing and their lived experiences in a nursing program. The findings report that men feel nursing is a worthwhile career in terms of compensation, job security, and opportunities for advancement. Labels such as “male nurse” were viewed as unfavorable terms, and stereotypes of men being less caring than women or less masculine than other men are viewed negatively by men in the profession. The study concluded the need for male nursing faculty members, mentors, and role models in the profession.

Hodges et al. (2016) conducted a literature review to identify and describe barriers to and strategies for male nursing students’ learning experience. Barriers identified in the study include lack of history of men in nursing, lack of male role models, role strain, gender discrimination, and isolation. Strategies highlighted in the review include support groups, peer mentoring, policy review, male mentors or role models, inclusive imaging, as well as preservation of male identity.

There is an employment gap for persons with disabilities in nursing. Persons with disabilities have the ability to improve the nursing profession by bringing a unique perspective

and skill set to clinical practice. Several barriers and attitudes exist regarding this population in nursing, which makes recruitment and retention very difficult. Gonzalez and Hsiao (2020) report that most people with disabilities recognize their own limitations and will find work that aligns with their strengths. While a person with physical disabilities may not be able to perform duties in certain settings, areas such as legal nurse council, telephone triage, online education, and psychiatric nursing may be an excellent fit. There is a call for nurse educators to be advocates for students with disabilities, and create a welcoming and inclusive learning environment.

Discussion

This independent study sought to explore various strategies to diversify the student population within nursing education. The major theme that emerged from the literature review include barriers to recruitment and retention of URM students into nursing education due to a variety of factors discussed above. The literature suggests that while efforts have been made to address this issue, there is much more work that needs to be done. This study is particularly helpful in highlighting where there are gaps, and proposing ideas for future practice.

Regarding implications for nursing practice, holistic admissions is a university admissions strategy that “assesses an applicant’s unique experiences alongside traditional measure of academic achievement such as grades and test scores” (AACN, n.d., para 1.). Holistic admissions is one strategy nursing programs could implement to provide equal opportunity for URM students applying for admission into the program. A major theme that emerged throughout the literature was the need for mentorship programs, ideally from other minority populations within nursing, but that is not always possible. One possible solution would be the development of an academic enrichment program which would include professional writing seminars, strategies for academic success, and peer and/or faculty mentorship. This program would be ongoing

throughout their college career and offer mentorship and support as students navigate college (Noone et al., 2020).

Financial burden was a common barrier reported throughout the literature. Therefore, nursing programs should apply for grants and offer scholarship to qualifying individuals in order to alleviate the financial barrier of completing a program. Scholarships could assist students with cost of tuition, books, transportation, as well as living expenses. In turn, academic success is promoted as students are able to spend more time studying and engaging in professional opportunities (McNally, 2019).

Implications for nursing education includes the need for ongoing faculty training. Nursing faculty should be provided with and required to complete diversity and inclusion training, as well as unconscious bias training. Cultural competence training should be part of institutional policy. Additionally, ongoing faculty development should focus on enhancing equity (Noone et al., 2020). Faculty members should review their curriculums, lesson plans, and test questions or assignments to ensure cultural biases have been removed and diversity training has been incorporated. Faculty should perform ongoing or routine cultural climate assessments to evaluate their efforts in creating a safe, multicultural environment (Bristol et al., 2020).

“Nurse educators feel ill prepared to facilitate the challenging discussions on key topics of power, privilege, dominance, and institutionalized racism” (Zappas et al., 2021, p. 227). Nurse educators, who are predominantly white, lack the skills and confidence to speak out against social injustice and dismantle racism. This issue calls for implementation of policy change at the institutional level to include zero-tolerance for discrimination and incivility. In instances where microaggressions and incivility are present or persistent within the classroom, students of marginalization are underperforming and having difficulty succeeding in the program. Faculty

should ensure that there are evidence-based reasons for inclusion of ethnicity or race within their curricula in regards to health disparities (Zappas et al., 2021).

As previously mentioned, thousands of studies have reviewed individual URM groups in nursing education, but little research has considered how to effectively implement these strategies when multiple groups are represented in nursing programs. More research is needed in how to create a safe, unbiased classroom for every URM group simultaneously. Creating a truly inclusive classroom takes a lot of education, preparation, and planning for educators. Progress cannot be done without the support from the institution, healthcare agencies, and governing bodies. Nursing programs should maintain an ongoing record of student demographics and success rates to evaluate effectiveness of their efforts.

Conclusion

Social injustices and marginalization of minority populations is at the forefront of our nation's priorities. The U.S. population is sicker than ever before making the need for quality healthcare of utmost importance. The National League for Nursing ([NLN], 2016) believes that quality healthcare and diversity are inseparable and must coexist. Therefore, it is imperative that academic leaders create an environment where diverse faculty and students can thrive (NLN, 2016). A systematic review of the literature revealed common themes that include barriers for URM students to apply and succeed within a nursing program. Barriers identified include a lack of financial support, social isolation, marginalization, and unconscious biases. The research recognizes the need for mentorship, role models, cultural competency training, culturally congruent language, and overall academic, social, and financial support.

While efforts have been made toward diversifying the nursing workforce, ongoing efforts are still needed. Implications for nursing practice, education, policy, and research were discussed

and highlighted the responsibility of the nursing faculty to create a safe, welcoming environment for students of all URMs by incorporating cultural training into the curriculum, using evidence-based practice, and offering support. Ongoing research is needed to create effective strategies that address multiple URM groups at a time to ensure equitable opportunities for all students.

References

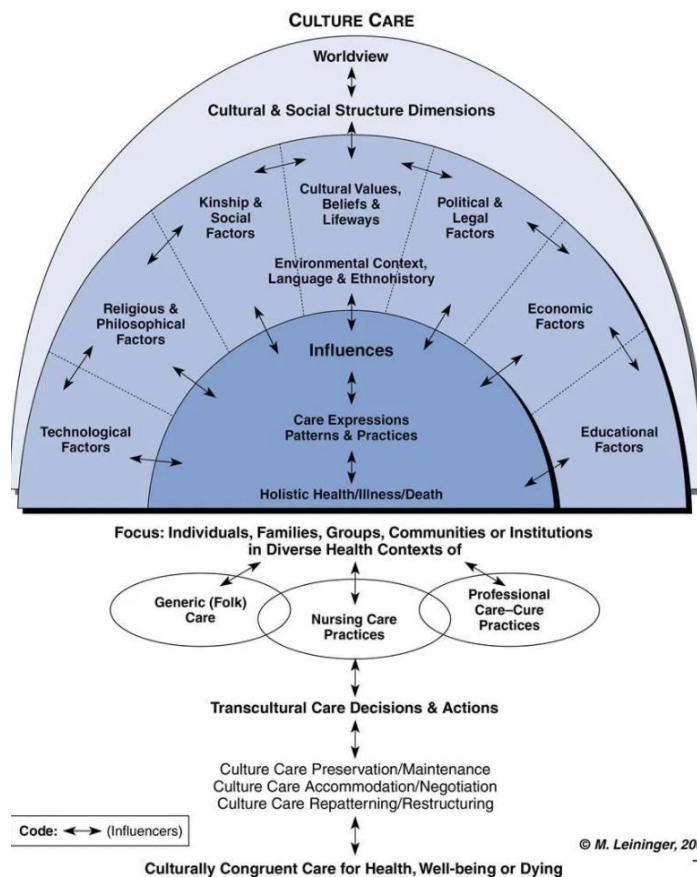
- Alicea-Planas, J. (2017). Shifting our focus to support the educational journey of underrepresented students. *Journal of Nursing Education*, 56(3), 159-163. <https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20170222-07>
- American Association of Colleges of Nursing. (2017). *Diversity, equity, and inclusion in academic nursing*. <https://www.aacnnursing.org/News-Information/Position-Statements/White-Papers/Diversity>
- American Association of Colleges of Nursing. (2019). *Enhancing diversity in the workforce*. <https://www.aacnnursing.org/News-Information/Fact-Sheets/Enhancing-Diversity>
- American Association of Colleges of Nursing. (n.d.). *Holistic admissions*. Retrieved March 26, 2021, from <https://www.aacnnursing.org/Diversity-Inclusion/Holistic-Admissions>
- Bednarz, H., Schim, S., & Doorenbos, A. (2010). Cultural diversity in nursing education: Perils, pitfalls, and pearls. *Journal of Nursing Education*, 49(5), 253-260. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2921036/>
- Bristol, T., Brett, A., Alejandro, J., Colin, J., Murray, T., Wangerin, V., Linck, R. & Walton, D. (2020). Nursing faculty readiness for student diversity. *Teaching and Learning in Nursing*, 15(1), 104-108. <https://doi.org/10.1016/j.teln.2019.09.001>
- Englund, H. (2018). Relationship between marginality and minority status in undergraduate nursing students. *Journal of Nursing Education*, 57(6), 339-346. <https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20180522-04>
- Fuller, B. L., & Mott-Smith, J. A. (2017). Issues influencing success: Comparing the perspectives of nurse educators and diverse nursing students. *Journal of Nursing*

- Education*, 56(7), 389-396. <https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20170619-02>
- Gaines, K. (2020, September 14). *What are nursing theories?*
<https://nurse.org/education/nursing-theories/>
- Garneau, A. B. (2016). Critical reflection in cultural competence development: A framework for undergraduate nursing education. *Journal of Nursing Education*, 55(3), 125-132.
<https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20160216-02>
- Green, C. (2020). Equity and diversity in nursing education. *Teaching and Learning in Nursing*, 15(4), 280-283. <https://doi.org/10.1016/j.teln.2020.07.004>
- Gonzalo, A. (2019, September 11). *Madeleine Leininger: Transcultural nursing theory*. Nurseslabs. https://nurseslabs.com/madeleine-leininger-transcultural-nursing-theory/#leiningers_transcultural_nursing_theory
- Hodges, E. A., Rowsey, P. J., Gray, T. F., Kneipp, S. M., Giscombe, C. W., Foster, B. B., Alexander, G. R., & Kowlowitz, V. (2017). Bridging the gender divide: Facilitating the educational path for men in nursing. *Journal of Nursing Education*, 56(5), 295-299.
<https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20170421-08>
- McNally, K., Metcalfe, S. E., & Whichello, R. (2019). Interventions to support diversity in nursing education. *Journal of Nursing Education*, 58(11), 641-646.
<https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20191021-05>
- Mitchell-Brown, F. (2020). Enhancing cultural competency: A phenomenological study. *Journal of Nursing Education*, 59(9), 485-492.
<https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20200817-02>
- National League for Nursing. (2016). *Diversity in nursing: An NLN vision statement*.

<http://www.nln.org/newsroom/news-releases/news-release/2016/02/16/diversity-in-nursing-an-nln-vision-statement>

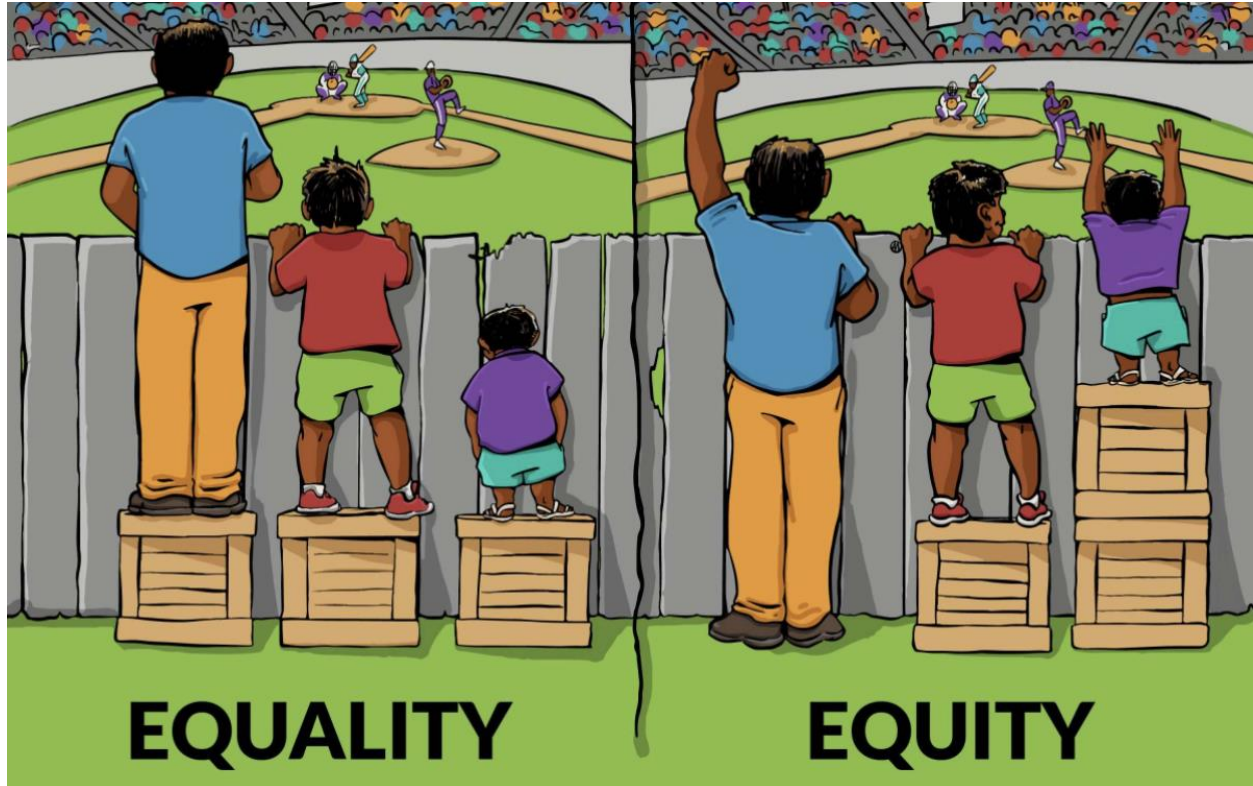
- Noone, J., Najjar, R., Quintana, A. D., Koithan, M. S., & Vaughn, S. (2020). Nursing workforce diversity: Promising educational practices. *Journal of Professional Nursing*, 36(5), 386-394. <https://doi.org/10.1016/j.profnurs.2020.02.011>
- Petges, N., & Sabio, C. (2020). Perceptions of male students in a baccalaureate nursing program: A qualitative study. *Nursing Education in Practice*, 48. <https://doi.org/10.1016/j.nepr.2020.102872>
- Spencer, T. D. (2020). Improving diversity of the nursing workforce through evidence-based strategies. *Journal of Nursing Education*, 59(7), 363-364. <https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20200617-01>
- United States Census Bureau. (2019, July 1). *Quick Facts: United States*. Retrieved January 29, 2021, from <https://www.census.gov/quickfacts/fact/table/US/PST045219>
- Williams, L. B., Bourgault, A. B., Valenti, M., Howie, M., & Mathur, S. (2018). Predictors of underrepresented nursing students' school satisfaction, success, and future education intent. *Journal of Nursing Education*, 57(3), 142-149. <https://doi-org.ezproxylr.med.und.edu/10.3928/01484834-20180221-03>
- Zappas, M., Walton-Moss, B., Sanchez, C., Hildebrand, J. A., & Kirkland, T. (2021). The decolonization of nursing education. *The Journal for Nurse Practitioners*, 17(2), 225-229. <https://doi.org/10.1016/j.nurpra.2020.11.006>

Appendix A: Leininger's Culture Care Theory Sunrise Model



Note. This model demonstrates that cultural care world-view flows into knowledge about individuals, families, groups, and communities in diverse health care systems. The middle arch encompasses all the factors that encompass the diverseness that exists among individual and groups. The two-way arrows demonstrate the interrelatedness, as well as similarities and differences that are present among the client and the health care provider. Below the arches is where the nurse provides care and implements action after considering all aspects of the client's culture. The nurse is the link between the client and the professional system. From "Culture Care Theory of Diversity and Universality," by M. R. McFarland, 2017, Nurse Key (<https://nursekey.com/22-culture-care-theory-of-diversity-and-universality/>) Copyright 2004 by M. Leininger.

Appendix B: Equality Versus Equity



Note. This image depicts the conceptual differences between equity and equality. Equity recognizes that people need different resources to be successful. Considerations should be made for access to higher education. The primary goal is to achieve fairness unhindered by biases, stereotypes, and prejudices. From “What’s the Difference Between Equity and Equality?,” by E. Gutoskey, 2020, MentalFloss (<https://www.mentalfloss.com/article/625404/equity-vs-equality-what-is-the-difference>).