

## ORIGINAL RESEARCH

# Being different while making a difference: A qualitative analysis of underrepresented nursing faculty members' lived experiences

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**Received:** December 23, 2021

**Accepted:** March 6, 2022

**Online Published:** March 14, 2022

**DOI:** 10.5430/jnep.v12n7p22

**URL:** <https://doi.org/10.5430/jnep.v12n7p22>

## ABSTRACT

There is a need to increase the number of faculty members in nursing academia from underrepresented groups. Increased numbers of nursing faculties from underrepresented groups can make an impact on the success and retention rates of students from underrepresented groups. Schools of nursing need to find better ways to be inclusive of all racial/ethnic and gender minorities. By having a better understanding of the isolation these individuals feel, nursing faculty members can make a concerted effort to better include these faculties from underrepresented groups into the organizational culture. Inclusion leads to faculty member success, which can then assist in the recruitment and retention of nursing students from underrepresented groups. This can lead to a nursing workforce better representative of the patients and communities it serves.

**Key Words:** Underrepresented nursing workforce, Underrepresented nursing faculty, Diversity, Organizational culture

## 1. INTRODUCTION

The nursing profession is in a crucial state. As the population continues to age, there will be an increased need for nurses. The American Association of Colleges of Nursing (AACN) predicts that there is a need for 203,700 new registered nurses each year through 2026 to fill new positions as well as replace retiring nurses. However, nursing school enrollments are not able to effectively produce enough graduates in order to meet this need.<sup>[1]</sup> One of the main reasons for this is the nursing faculty shortage that is currently occurring.

In 2020 over 75,000 qualified applicants were turned away from nursing programs.<sup>[2]</sup> This has been linked to insufficient numbers of nursing faculty, lack of clinical sites, lack of classroom space, as well as budgetary constraints. However,

the strongest mitigating factor cited by colleges of nursing is a lack of nursing faculty. As of 2018, there were 1,715 vacant nursing faculty positions in the United States.<sup>[1]</sup> One strategy that has been discussed to increase the number of nursing faculty is to recruit more diverse nursing faculty.<sup>[3]</sup> However, this has traditionally not occurred.

As of 2021 in the United States, 71.2% of nursing faculty were white, 6.9% African American, 9.2% Hispanic, 10% Asian, 0.2% American Indian, and 2.5% unknown. At the same time, females made up 82.5% of nursing faculty, whereas men made up 12.4%.<sup>[4]</sup> It is obvious that there needs to be an increased number of nursing faculty from underrepresented groups.

Recruitment and retention of underrepresented groups into

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nursing has been explored in limited fashion in previous literature; however, there have been no specific strategies proposed to recruit underrepresented groups into the nursing faculty role.<sup>[5-10]</sup> Researchers have explored the experiences of males in nursing academia.<sup>[10]</sup> Mott and Lee found that male nursing faculty enter into academia in order to give back to the profession as well as help future nurses. However, they often feel that they need to watch themselves around female students, in order to not be accused of sexual misconduct. Men in nursing academia also felt like they were navigating unfamiliar waters, needing mentorship from similar individuals to guide them. Because there are limited numbers of men in nursing academia, they often felt like the odd man out.<sup>[10]</sup>

While the nursing literature has been very limited in terms of underrepresented groups in faculty roles, other specialty areas have focused more on the issue. In schools of medicine, faculty of color have been found to play essential roles in addressing health disparities, increasing diversity in healthcare, as well as improving health profession education. Medical school faculty of color experienced invalidation of their sense of self, othering, and unequal standards and access to resources. They also went through periods of strategic engagement and disengagement.<sup>[11]</sup>

Faculty of color face inequalities in higher education in general. In predominately white institutions, faculty of color find themselves isolated and feeling alone, experiencing emotional discomfort due to heightened visibility, experiencing implicit bias and microaggressions, receiving less support for their research and teaching, and having a greater perceived challenge to obtaining promotion and tenure.<sup>[12]</sup> These are similar to the experiences that Mott and Lee found in their study on male nursing faculty.<sup>[10]</sup>

Othering in nursing is a major problem faced by minority faculty. Othering has been defined as a “set of dynamics, processes, and structures that engender marginality and persistent inequality across any of the full range of human differences based on group identities.”<sup>[13,14]</sup> Roberts and Schiavenato stated that othering is typically prescribed to racial/ethnic minorities, but can also be applied to gender minorities. When othering occurs, either the subordinate group takes on characteristics of the dominant group, which leads to loss of self-identity in the profession as well as loss of other-centric educational paradigms, or they face microaggressions and incivility.<sup>[14]</sup> An additional consequence of othering is the majority group can create policy to oppress the minority group.<sup>[13]</sup> The concept of othering was clearly demonstrated in the research on male nursing faculty by Mott and Lee.<sup>[10]</sup>

There is new emphasis being placed on the need to diversify

the nursing workforce. In 2020, the AACN published a white paper which concluded the demand for nurses who are more representative of the patients they serve was a fundamental responsibility of institutions of higher education. The AACN concluded it is the responsibility for institutions of higher education to recruit, admit, and retain a more diverse student enrollment. In addition, the AACN also concluded it was essential for institutions of higher education to have a faculty who are representative of the students being recruited and admitted.<sup>[15]</sup>

In 2021, the AACN updated and published *The Essentials: Core Competencies for Professional Nursing Education*. With the new essentials, strong emphasis is placed on diversity, equity, and inclusion. The AACN points out that the existing inequitable distribution of the nursing workforce across the United States, particularly in underserved urban and rural areas, impacts access to healthcare services across the continuum of care from health promotion and disease prevention, to chronic disease management, to restorative and supportive care. The AACN stresses that diversity, equity, and inclusion require intentionality an institutional structure of social justice, and individually concerted efforts.<sup>[16]</sup>

## 2. METHODS

### 2.1 Purpose

What is limited in the nursing literature is an understanding of the lived experiences of faculty members in nursing from underrepresented groups. Therefore, the purpose of this study was to document and analyze the perceptions of nursing faculty members from underrepresented groups in order to gain a better understanding of their lived experiences in nursing academia, and ultimately, utilize this knowledge as a possible means to increase the number of faculty members in nursing education from underrepresented groups.

This study was conducted utilizing descriptive phenomenological methodology. Descriptive phenomenological methods are used where there is little known about an issue. The goal of this type of research is to make clear and understand the meaning of the phenomenon from the perspective of those who experience it.<sup>[17]</sup>

### 2.2 Study participants

Convenience sampling was used to recruit participants. Inclusion criteria included being from an underrepresented group in nursing academia as well as wanting to participate. For this study, there were 12 participants. The sample consisted of two African American males, two Hispanic females, and eight African American females. Participants ranged from 35 – 70 years of age. Participants were from ten differ-

ent states within the United States.

### 2.3 Investigational method

After gaining approval from the Institutional Review Boards (IRB) at the researchers' universities, an email solicitation of participation was sent. In this email, the researchers requested interested faculty members to access an email account created specifically for the research project. The initial emails were sent to underrepresented nursing faculty that the researchers knew. The researchers then responded to interested individuals to set up a time to conduct a telephone interview. Telephone or email interviews were conducted utilizing the questions based on participant preference. The interview questions were pilot tested with three underrepresented nursing faculty with a background in qualitative research. The questions used for the interviews were:

- 1) What type of nursing program do you work in?
- 2) What made you decide to pursue nursing education as a career?
- 3) Tell me what your experiences have been like being a faculty member?
- 4) What are the pros and cons of being a minority faculty member in nursing?
- 5) Is there anything else you want to add or would like me to know?
- 6) Do you know of other individuals who may want to participate in this study? If so, please send this information to them.

After obtaining informed consent from the participants, the interviews were conducted and audio recorded for accuracy. The interviews lasted from between 45 and 60 minutes. Following the interview, a snowball approach was used to find additional research participants. Interviews were conducted until data saturation occurred. There was saturation of the data after 12 interviews were completed. Other respondents obtained from snowball sampling were not interviewed or included in the study.

### 2.4 Analysis

After the completion of each interview, the audio recording of that interview was transcribed utilizing Dragon Naturally<sup>®</sup> speaking software. Transcription occurred before conducting the next interview. The transcripts were read and compared to the audio recordings for accuracy. Following transcription, the transcripts were analyzed utilizing the Colaizzi method of data analysis.<sup>[18]</sup>

The Colaizzi method consists of seven steps. In the first step, the researcher becomes immersed in the data, reading each transcript multiple times. The second step of the process is to identify all significant statements that have direct relevance

to the phenomenon under investigation. In the third step, a formulated meaning is assigned to each significant statement. In this step, the researcher must use "bracketing" to minimize bias. In the fourth step, formulated meanings are clustered into themes. The fifth step consists of developing an exhaustive description of the phenomenon under investigation. The sixth step of the process is producing a fundamental structure, reducing the exhaustive description to a short statement that captures those aspects that are essential to the structure of the phenomenon. The seventh and final step in the process is to conduct a "member check," returning the fundamental structure to each participant in the study to validate if the statement reflected their experience of the phenomenon.<sup>[18]</sup>

Dependability was established by utilizing triangulation and member checking. Three researchers independently analyzed each transcript for significant statements, formulated meanings and theme clusters, before coming together to compare analyses. A final analysis was jointly conducted, and the agreed upon significant statement, formulated meanings and theme clusters were collectively agreed upon. Utilizing the theme clusters, an exhaustive description of the phenomenon was developed, and reduced to a statement of fundamental structure.

## 3. RESULTS

Three theme clusters emerged from the data analysis. These theme clusters included: 1.) Appeal of Academia, 2.) Experiences in Academia, and, 3.) Overcoming Challenges. Each of these theme clusters represent multiple formulated meanings. Formulated meanings are included in parentheses within the description of each of the three theme clusters below.

### 3.1 Theme Cluster 1: Appeal of academia

Underrepresented nurse educators who participated in this study were attracted to nursing education and the faculty role because they had a desire to teach (Teaching), they felt the faculty role provided flexibility (Flexible Schedule), and they want to influence the future of nursing, specifically by increasing the number of underrepresented nurses (Shaping the Future).

For the formulated meaning labeled "teaching" some of the verbatim statements from participants included the following:

"I have always wanted to teach people"

"I liked having students with me in my clinical role"

"I have always had a desire to teach people"

"When I became a nurse, I liked orienting new employees. So, I thought that teaching might be something I would enjoy doing."

For the formulated meaning labeled “Flexible Schedule” some of the verbatim statements from participants included the following:

“I liked the autonomous work schedule”

“I have the ability to work part-time as a practicing nurse”

“I also love the flexible work schedule”

“I also needed a little bit more flexibility with my family that I thought teaching could offer”

For the formulated meaning labeled “Shaping the future” some of the verbatim statements from participants included the following:

“I get a lot of satisfaction watching and seeing students grow. I want to strategically influence the next generation through education. I think that I have that opportunity doing this.”

“I think the biggest pro is being able to shape the future of nursing”

“I wanted to help increase the number of quality nurses in practice”

“I wanted to help encourage and mentor young women and men in the Latino Community to consider becoming nurses”

### 3.2 Theme Cluster 2: Experiences in academia

Underrepresented nurse educators who participated in this study described their experiences as faculty members in both positive and negative terms. The participants described feeling included and welcomed as a nursing faculty member (Feelings of Inclusion), and often felt valued by their colleagues for their opinions and ideas as an underrepresented faculty (Being Valued). However, the participants in this study also expressed feelings of loneliness and isolation, and often they were the only underrepresented member of the nursing faculty (Feelings of Isolation). Participants in this study expressed valuing their work with students, especially serving as a role model for underrepresented nursing students (Being a Mentor).

For the formulated meaning labeled “feelings of Inclusion” some of the verbatim statements from participants included the following:

“I have always felt welcome and included”

“I have always felt a part of the faculty externally in that I always felt welcome and included by faculty”

“Everyone is nice and the faculty I work with are great. I have always had all of my questions answered and felt I had support”

“I get along really well with most of my colleagues. I really enjoy being a faculty member”

For the formulated meaning labeled “being valued” some of the verbatim statements from participants included the

following:

“Being a minority automatically gives you a leg up as far as available opportunities. You are attractive to others. Others want to hear what you have to say. Your thoughts and opinions valued”

“Men are valued in nursing by female colleagues and others in healthcare and academia”

“Always feel valued and feel my opinion is important to my colleagues”

“I felt I was valued and my opinion, position, was sought after to ensure I was included and my unique perspective was valued”

For the formulated meaning labeled “feelings of isolation” some of the verbatim statements from participants included the following:

“Just knowing I was African American, and that 99% of faculty was white females, made me feel a little isolated within myself.”

“It’s hard to be the only black person. It makes me feel isolated because no one else can really relate to me. So, that makes it tough. It feels lonely at times. Lonely and isolated.”

“Even though I feel I am treated very well by the other faculty, I often feel lonely because of the lack of diversity.”

“There are times it can be isolating, since there aren’t many other minority people where I work. So that makes it hard. There aren’t other people who know what I am experiencing.”

For the formulated meaning labeled “being a mentor” some of the verbatim statements from participants included the following:

“I think the biggest pro is that I can help students who have similar backgrounds to me.”

“At the same time, I can be the person that our minority students can look up to and be someone they can go to. I think that is probably the best thing about being a minority in nursing education is being able to be that go to person.”

“I have enjoyed being able to mentor students who were like me when I went through nursing school.”

“Growing up, I had some really good coaches and teachers. I saw how they changed the path of my life and wanted to be able to do the same for others.”

### 3.3 Theme Cluster 3: Overcoming challenges

Underrepresented nurse educators who participated in this study expressed concerns over challenges to increasing diversity in nursing, and supporting new underrepresented nurse educators. Participants described the need to put more resources and effort into promoting a diverse image of nursing (Changing the Image). Participants often described how mentors for new underrepresented nurse faculty are lacking in

many academic settings, and the importance of having mentors for new nurse educators (Need for Faculty Mentors).

For the formulated meaning labeled “changing the image” some of the verbatim statements from participants included the following:

“[Need] visibility in a profession dominated by females related to recruiting.”

“The lack of investment in improving and enhancing diversity in nursing education and practice.”

“Stereotype thoughts, gay, why didn’t you become a doctor, could not handle real jobs, etc.”

“Prejudice is real and I have had this experience as a full time faculty and as an adjunct faculty member at other colleges. There is still an unspoken assumption out there that a nurse should be white and blonde.”

For the formulated meaning labeled “need for faculty mentors” some of the verbatim statements from participants included the following:

“I really would have liked to have a mentor, but did not get one.”

“Lack of role models. Mentors usually a half-generation-older.”

“Nursing faculty can be very closed. As a new faculty, very few people spoke to me for two years. I was not provided a mentor and had to learn most things on my own.”

“It is helpful to have a mentor. That’s one thing I try to do with new faculty now. I want to mentor them because I didn’t have that opportunity to have a good mentor when I started.”

### 3.4 Exhaustive description

Based on the formulated meanings and theme clusters, an exhaustive description of the phenomenon was developed as follows:

Nurse educators from underrepresented groups who participated in this study were attracted to nursing education and the faculty role because they had a desire to teach. Several first experienced this enjoyment teaching while working in the clinical setting. In the clinical setting, they had opportunities to serve as preceptors, orienting and training newly hired nurses. They also had opportunities in the clinical setting to work with nursing students. These experiences serving in the role of teacher in the clinical setting were transformative, motivating these nurses to begin considering teaching of nursing as a full time or part time career choice.

As they considered teaching as a career choice, the nurse educators from underrepresented groups in this study weighed the positives and negatives of the teaching role. Ultimately, they felt the benefits of a career in nursing education were worth any trade-offs, and they made the change from work-

ing full time in the clinical setting to working either full time or part time in nursing education. One of the primary benefits they realized in teaching was the flexibility it offered. Unlike the clinical setting, driven by rigid work shifts, teaching allowed these nurses opportunities to have a more autonomous work schedule. Their teaching schedule, and the flexibility it provided, also allowed them time for their personal and family needs.

One of the positives of serving as a nursing instructor, as described by the nurse educators from underrepresented groups in this study, is the ability to influence the future of nursing. These nurse educators specifically want to help increase the number and quality of nurses in future practice, as well as increase the diversity of the nursing workforce. They feel serving in the role of nurse educator provides them with opportunities to encourage and mentor nursing students, and help the students they teach become the best possible nurses. Knowing that they play a role in shaping the future of the nursing profession by training the nurses of tomorrow brings these educators great satisfaction.

In general, the nurse educators from underrepresented groups in this study feel welcomed and included by their peers in the academic environment. Now, as somewhat seasoned nurse educators, they report having close, supportive relationships with their colleagues, and feel valued as a team member. They sense their peers seek out and respect their ideas and opinions because they are underrepresented, have diverse experiences, and are able to bring unique and much needed perspectives to discussions and decisions. At the same time, because they may be the only underrepresented nurse educator on the faculty, these nurse educators struggle with feelings of loneliness and isolation. If there were other minorities like them on the nursing faculty, these feelings may not be as strong.

Although they may occasionally experience feelings of isolation or loneliness among colleagues, the nurse educators from underrepresented groups in this study have engaging and meaningful relationships with underrepresented nursing students. Nursing students from underrepresented groups often seek out these nurse educators for advice and support. The relationships developed with these nursing students are highly valued by these nurse educators, and they take pride in earning these students’ respect and trust, and serving as role models and mentors for these students. They receive great satisfaction and fulfillment in forming mentor-mentee relationships with underrepresented nursing students. They report having had similar relationships when they were younger, or were nursing students themselves, and describe these relationships as having had a significant impact on their

own lives and career trajectory.

Overall, nurse educators from underrepresented groups in this study are satisfied with their decision to pursue a nurse faculty role, but acknowledge there are challenges for nursing educators. They believe one of the greatest challenges for nurse educators, and the nursing profession in general, is changing the image of nursing to promote diversity. They believe the stereotypical image of nurses as white and female continues to prohibit recruitment of ethnic and gender minorities, and this will not change until there are institutional investments aimed at promoting a more inclusive image of nursing.

In addition to promoting more diversity in nursing, these nurse educators from underrepresented groups perceive another challenge for nurse educators is the onboarding process and support given to new underrepresented nurse educators. Just as they serve as role models and mentors for underrepresented nursing students, they believe they would have benefited from having a faculty mentor. Ideally, they believe a faculty mentor should be someone who is the same ethnicity or gender, and close in age to the new nurse educator; however, they acknowledge underrepresented nurse faculty are lacking in many academic settings. As new faculty, they sometimes felt ignored and left to struggle on their own for the first few years of their teaching career. Now, in an effort to make things better for new faculty, they reach out to them and offer support and guidance.

### 3.5 Fundamental structure

The researchers reduced the exhaustive description into a short statement that captures the essence of the phenomenon. This statement represents the fundamental structure of the phenomenon under investigation: A teacher and role model who is different, who feels included, and excluded at times, who always strives to make a positive difference.

## 4. DISCUSSION

These three theme clusters of Appeal of Academia, Experiences in Academia, and Overcoming Challenges are congruent with what is found in the previous literature regarding minorities underrepresented faculty in nursing academia.

### 4.1 Appeal of academia

Similar to the findings in this study, other researchers have reported a desire to make a difference is a motivating factor for pursuing a career in academia. One study conducted in the United Kingdom in 2020 used data collected from a survey over five years of teacher education graduates of UCL Institute of Education in London. The study revealed that wanting to make a difference, the love of their subject area,

and a desire to work with young people, were the primary motivating factors for choosing teaching as a career. The researchers also reported one of the reasons teachers leave the profession is work/life balance.<sup>[19]</sup> The participants in this study emphasized having a flexible schedule was one of the primary reasons they were attracted to teaching. Having a flexible schedule was an important work/life balance factor for the participants in this study.

### 4.2 Experience in academia

Participants in this study reported feelings of being valued and included, but also reported having feelings of isolation, when describing their experience in academia. This is similar to what Mott and Lee found in their study of men in nursing academia. In that study, the term “odd man out” was used. For the men in that study, terms like “limited peer group”, feeling “lonely at times” and “isolation” were used.<sup>[10]</sup> Participants in this study felt the same way. Some participants in this study described being “isolated due to being the only person who was black.”

Previous research has shown that there may be unconscious bias related to minorities in nursing. The concept of unconscious bias limits the full participation of minorities into the nursing profession. It is defined as the bias an individual possess but aren't fully aware that they possess it.<sup>[20]</sup> Bias, whether conscious or unconscious, has existed in nursing for many decades. Much of the literature about unconscious bias has revolved around men in the profession.<sup>[10,21,22]</sup> However, the same principles of unconscious bias can be related to underrepresented faculty members.

It's important to understand nursing history when looking at the development of unconscious bias. During the time of Nightingale, racial and ethnic minorities were excluded from the nursing profession. The main reason being is that Nightingale wanted to raise the view of nursing from the place in society it was, where lower class citizens and prostitutes were nurses. Unfortunately, during this time in history, racial and ethnic minorities were usually part of the lower class.<sup>[23]</sup> This made it difficult, if not impossible, for them to become nurses.

In the United States, there were other factors that led to racial and ethnic minorities, especially blacks, being omitted from nursing. Even after the American Civil War, segregation was common, especially in the southern states. If you remember the educational model that was developed by Nightingale, nursing schools were attached to hospitals. Since there was segregation in hospitals, black students were not admitted into these nursing schools.<sup>[24]</sup> This continued until the 1960s. Participants in this study also felt that there is segregation

occurring in nursing academia today, through isolation and being treated as outsiders.

Having more underrepresented nursing faculty can help to break down these barriers. As described by the participants in this study, underrepresented faculty can be the difference for other underrepresented students or faculty.

### 4.3 Overcoming challenges

When considering the theme of Overcoming Challenges, participants in this study expressed the need to change the image of the nursing profession. This need to diversify the nursing profession is now being emphasized by organizations such as AACN.<sup>[15,16]</sup> The participants in this study also emphasized the need to support and retain nursing faculty from underrepresented groups, and the main way this is accomplished is through mentorship. As previously stated, several participants in this study did not have a mentor who looked like them, but this was something they wanted when starting their career in nursing academia. It is also something they strive to do for nursing students and other underrepresented faculty. This is similar to what Mott and Lee found in their study on male faculty.. In their study, they termed this “navigating unfamiliar waters.” They found that for men, being in nursing academia provided them the “great opportunity to impact future nurses” and by having a male role model “the likelihood of success for males entering into nursing increases.”<sup>[10]</sup>

Mentoring has been shown in disciplines such as science that matching the gender, color, and ethnicity of the mentor and mentee increases the success of the mentee.<sup>[25]</sup> Mentorship has also been shown to be effective in the retention of underrepresented faculties and students.<sup>[26,27]</sup> In this study, many of the faculty members from underrepresented groups chose to enter into nursing academia in order to mentor younger students who are similar in race, ethnicity or gender, and assist in their success.

It is interesting to note the responses from participants in this study compared to previous research related to men in

nursing and nursing academia.<sup>[9,10,20,21]</sup> Underrepresented nursing faculty, whether they are ethnic/racial or gender minorities, have very similar needs. From these studies, it can be concluded that underrepresented faculty members want other faculty members who look like them. Otherwise, there is a strong sense of isolation. They also crave mentorship from like individuals, even though this rarely happens. As a result, faculty from underrepresented groups in this study have taken on the role of mentorship for newer nursing faculty members or nursing students from underrepresented groups.

### 4.4 Limitations

There were several limitations to the study. Being qualitative in design, it is impossible to generalize the findings from this study to all nursing faculty from underrepresented groups. In addition, the study was based on a small sample size.

## 5. CONCLUSION/IMPLICATIONS FOR PRACTICE

As a profession, there is a need to increase the number of underrepresented faculty members in nursing academia. Increased numbers of underrepresented nursing faculties can make an impact on the success and retention rates of underrepresented students. This study provided a better understanding of the needs of nursing faculties from underrepresented groups. These needs are similar to the needs of male nursing faculty members. As a profession, nurses need to find better ways to be inclusive of all racial/ethnic and gender minorities. By having a better understanding of the isolation that these individuals feel, nurses and nursing faculty members can make a concerted effort to better include these underrepresented faculties into the organizational culture. Inclusion leads to faculty member success, which can then assist in the recruitment and retention of underrepresented nursing students.

## CONFLICTS OF INTEREST DISCLOSURE

The authors declare that there is no conflict of interest.

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