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The  
Changing  
Face of  
Nursing







UMMC  
RN



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# The Changing Face of Nursing

BY KEVIN NASH AND LIBBY ZAY

Until the mid-20th century, white caps, white aprons, and white shoes weren't the only similarities that made the students who roamed the halls at UMSON look uniform; they were also exclusively white and female. (See "The Class of 1915," Page 28.) Today, our student body looks remarkably different: 44 percent of UMSON students are minorities, and 12 percent are men, both figures above the national averages.

The shift began in 1950 when Esther McCready, BSN '53, an 18-year-old African-American woman, sued the School after she was denied admission. With the help of attorney Thurgood Marshall, she won her case, opening the doors for future students from diverse backgrounds. Not long after, Hector Cardellino, BSN '61, quietly became the first male student at the School. Officials solved the uniform dilemma by having him wear a white shirt, white pants, a black tie, and black shoes.





Although UMSON and other nursing schools have increasingly admitted students from diverse backgrounds over the years, the health care workforce still does not reflect the rich diversity of the United States. And that diversity is only expected to grow: The U.S. Census Bureau projects that by 2060, racial minorities will actually compose a *majority* of the country's population.

"As nurses care for a progressively more diverse population, those who understand the culture and customs of their patients will be better suited to provide quality care, improve patient satisfaction and health outcomes, and reduce health disparities," explains Jeffrey Ash, EdD, associate dean for diversity and inclusion and an assistant professor at UMSON. "Having a greater sense of cultural competence will prove to make a significant impact in providing effective care."

"The beauty of diversity is that there's a richness that comes from a variety of ways of thinking," Ash continues, adding that diversity "is not just about race and gender." It can also involve religious affiliation, ethnic heritage, age, socioeconomic status, sexual orientation, disability, and too many other factors to list.

Numerous studies have shown that patients are more likely to receive quality care and treatment when they share race, ethnicity, religion, language, or other experiences with their provider. The Institute of Medicine's (IOM) 2010 *Future of Nursing* report indicated that a diverse workforce contributes to enhanced communication, health care access, and patient satisfaction while decreasing health disparities. The report called upon nursing schools nationwide to increase the diversity of the nursing workforce, and it urged academic nurse leaders to collaborate with health care organizations, school systems, and community organizations to recruit and advance nursing students from all backgrounds.

"We are the health professionals making the most progress in terms of diversity but we still don't look like the people we serve," Susan B. Hassmiller, PhD, RN, FAAN, senior adviser for nursing at the Robert Wood Johnson Foundation, said during her keynote address at the Maryland Action Coalition (MDAC) Retreat and Leadership Summit, May 22 at UMSON. (See "Building a Culture of Health," Page 9.)

MDAC was born out of the Campaign for Action, a national organization working in every state to achieve goals based on the IOM's report, including increasing diversity. Several other organizations – among them the American Hospital Association, the Robert Wood Johnson Foundation, the Joint Commission, and the Association of Academic Health Centers – have released reports that point to minority student recruitment as a necessary step to addressing the nursing shortage.

So far, the numbers are steadily climbing. The National League for Nursing reported that the percent of students enrolled in RN programs who identify as minorities doubled between 1995 and 2014. Furthermore, the American Association of Colleges of Nursing has data to show that diversity is increasing at both the baccalaureate and graduate levels.

Here, students who are or who soon will be addressing the health care needs of our diverse communities talk about their role in changing the face of nursing. ♦

**"Embracing diversity increases awareness and acceptance of patients' cultural differences. It is very important to understand the values and beliefs of my patients to improve quality of care."**

KAFAYAT BELLO

## **Kafayat Bello** BSN, RN

*(pictured on previous page)*

**As a junior at Trinity Washington University in Washington, D.C., Bello participated in a summer externship at Fairfax Hospital in Virginia, for which all students were required to watch an open-heart surgery through a glass dome. As Bello watched the procedure, she paid close attention to the certified registered nurse anesthetist and was in awe of her autonomy and confidence. Bello knew that was what she wanted, too.**

**Originally from Nigeria, Bello moved to the United States as a teenager; she returns to her native country annually for two weeks to put into practice what she has been learning in school, volunteering as a nurse at clinics and hospitals.**

**"Working with nurses from varied backgrounds facilitates learning and delivery of care that encompasses a broader spectrum of views and considerations for patient needs," she says.**

Li never dreamed he would become a nurse; in fact, prior to serving in the Republic of Vanuatu in the South Pacific as a Peace Corps volunteer, he didn't know what nurses did other than what he had seen on television. He was impressed with how the Peace Corps nurse tasked with keeping the volunteers healthy during their two-year service experiences traveled to different in-country sites to offer care and services. As Li interacted with that nurse, he realized that nurses do more than measure blood pressure and take patients' temperatures. After witnessing the nurse's professionalism and care as she carried out her duties, she became Li's role model, inspiring his interest in nursing.

But as he prepared to leave the Peace Corps, Li felt he wasn't quite ready to go to nursing school. Instead, he earned a Master of Science in Public Health from the Tulane University School of Public Health and Tropical Medicine in New Orleans. Following his graduation, Li worked as a technical advisor for the Carter Center, a nongovernmental organization, in South Sudan, Africa, for two years before returning to the United States to work as a medical lab scientist. After six months, Li realized he wanted to be in a field with more options, he says, and remembered the Peace Corps nurse. After speaking to friends in the field, he adds, "I was sold."

"Nursing has long been regarded as a profession dominated by females, but diversifying the workforce allows us to dispel this stereotype," he says. "We need to advocate for more underrepresented groups working in the nursing profession and serving as role models in our communities."

"The increasingly diverse patient population in our health care system reflects the need for a more diverse workforce in the field of nursing."

TONY LI





“Over the years, I have appreciated being in a diverse environment. It opens your eyes and exposes you to things you would not normally be exposed to and lends the opportunity to meet the most interesting people.”

DEBBIE KIRBY



## Debbie Kirby BSN '89, RN-OBC

Growing up the oldest of three children, Kirby says her siblings considered her bossy. But she didn't see herself that way; instead, she felt she was just taking care of everyone. As an adult, Kirby is still making sure people are cared for. She believes nursing is an art that encompasses many characteristics and skills; nurses are not only caring and nurturing, but they are also effective communicators, critical thinkers, educators, and problem-solvers, she says. These traits attracted Kirby to nursing and have kept her engaged for nearly 30 years.

She began her career as a staff nurse in the University of Maryland Medical Center's (UMMC) labor and delivery unit and later helped open a high-risk inpatient wing to care for long-term obstetrical patients. She was also instrumental in opening UMMC's Center for Advanced Fetal Care, where she continues to work today. She recently decided that working in management is the next logical step, and although she had been out of school for 22 years, Kirby knew pursuing her master's degree is necessary to advance her career.

“Just the nature of an academic institution draws people from all walks of life together to learn and work,” she says. “Students, interns, and visiting professors all come from a variety of countries, religions, and cultures. Nursing is no different.”

## Jasmine Noronha BSN '12, RN, CPN

Noronha always knew she wanted to help people. As she contemplated potential career paths one night during her freshman year in college, she had a conversation with her roommate's mother, a nurse. The woman promised that nursing would provide countless opportunities for career options and that as a nurse, Noronha would never be bored. After a few months on her first nursing job on UMMC's pediatric progressive care unit in 2012, she found herself regularly advocating for her patients and decided she wanted to become a nurse practitioner. In Noronha's mind, she says, becoming a nurse practitioner would allow her to have more autonomy while using evidence-based practice to guide care.

In the spring, she did a clinical rotation at a federally qualified health center in Denton, Maryland, a rural area without many providers and where patients are vulnerable to economic and health disparities.

"Nursing is one of the most diverse professions," she says. "Something that is important in one culture may be overlooked in another."

"Your accent, nationality, or the color of your skin doesn't matter. What matters at the end of each shift is that you were your patient's advocate."

JASMINE NORONHA

