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Mentoring Urban Youth Toward a Nursing Career

Sarah McCulloch

St. Catherine University

MENTORING URBAN YOUTH TOWARD A NURSING CAREER

The nursing profession is dedicated to the promotion of wellbeing for all; however, significant disparities exist in patient populations who are underrepresented in the nursing workforce. The literature reports that increasing diversity in the nursing workforce can lead to improved patient outcomes, increased range of services, a greater understanding of patients' illness and a more holistic approach to wellbeing for all. Nurses who reflect the communities they serve, support patients to make better healthcare decisions based on a better understanding of their patients life experiences, family dynamics and perspectives of their patient/client population. These aforementioned qualities have the potential to lead to improved outcomes for high-risk populations (Oyserman, Bybee, &Terry, 2002; Banister, G., Bowen-Brady, H. M., & Winfrey, M. E., 2012; Lopez-Bushnell, K., Gardner, K., Sanchez, J., & Miller, D., 2010; Smith, B., 2014).

To increase the diversity of the nursing workforce requires significant work, work that must start prior to entering a college or university setting. Investing in programs to invigorate and entice students of color to the profession of nursing must start in high school. Students of color must be able to see themselves capable of being successful nursing professionals long before they enter into the nursing career. Studies have shown that a variety on interventions by mentors has the potential to assist students in seeing themselves in the future, create goals, and subsequently improve students outcomes that ultimately allow them to be eligible for the highly competitive nursing school curriculum (Oyserman, Bybee, &Terry, 2002). This scholarly project describes the process of establishing a nurse mentor program for high school students at an urban high school in the Midwest with an overall goal to enhance delivery of compassionate, quality, and diverse local health-care by providing opportunities for knowledge, skills, and leadership development. The project aims to provide a support system for students so they can successfully

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enter and complete a nursing program, by providing guidance, classes and information by nurses in the local community. The following paper provides the background and significance of establishing a mentor program in this setting, summarizes the literature to support the program, discusses other mentorship programs, identifies gaps in the literature, and describes the implementation of a mentor program with site information, stakeholders, outcomes, evaluation and implication for future nurse educators.

Background & Significance

In Minnesota (MN) only 6% of registered nurses identify themselves as Black or African American, Native American, Asian or multi-racial, and 1% identified as Hispanic, up from 4.5% total in 2008 (Minnesota Department of health, 2008; Minnesota Department of Health, 2012). Despite the trend upwards, the number of nurses who identify as non-white are not comparable to the general population in MN where 18% of the individuals identify as non-white, up from 16% in 2008 (Minnesota Demographic Data Center, 2008; Minnesota Demographic Data Center, 2012). The urban Minnesota city in which this project takes place reports that 24.4% of the population identify as a race other than white (United States Census Bureau, 2015) while nearly 65% of high school students within the school that this project takes place as identify as non-white (Minneapolis Public Schools, 2016). The dissonance between those that serve and those that are being served is noteworthy and deserves further attention.

Diversity Demographics in MN

The MN registered nurse workforce cannot increase its diversity if the diverse high school population cannot see themselves as successful college graduates or as a part of the nursing profession. Minnesota has low high school, college entrance, and college graduation rates for students of color compared to the rest of the country (Yeun & Williams, 2016;

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Minnesota Public Radio, 2016). According to recent data, 87% of white Minnesota high school students graduate in 4 years (similar to national averages), but only 62% of African-Americans, 66% of Hispanics and 52% of Native Americans graduate on time (Yeun & Williams, 2016).

Enrollment to nursing programs across the country is similar to the academic demographics of this Midwestern state. According to the American Association of Colleges of Nursing, 31.6% of baccalaureate degree enrolled students are students of color (American Association of Colleges of Nursing, 2016). The Minnesota Office of Higher Education reports that 26% percent of students enrolling in college are students of color (2015) and that white students are more likely to graduate from college compared to other race/ethnicity (2014).

To better attend to the populations that metropolitan health centers serve, the overall aim of this systems change project is to indirectly increase diversity in the RN workforce by enhancing the high school student's of color perception of ability in completing high school and entering and finishing a program in nursing. It is well documented that by increasing diversity in the workplace better patient outcomes in patients of color are documented (Banister, Bowen-Brady, & Winfrey, 2014). Practitioners who have life experiences and perspectives from backgrounds similar to those they serve, promote trust and provide enhanced decision-making at the bedside (Noone, Carmichael, Carmichael, & Chiba, 2007).

The approach for this systems change project is to reach out to high school students of color to improve graduation rates. According to Minnesota Public Radio, Minnesota's fastest growing future workforce is students of color, and they are the least likely to graduate from high school (2016). Minnesota Career and College Readiness Collaborative (MCCRC) and AchieveMpls are two initiatives in Minneapolis that aim to improve graduation rates and college readiness and have been used as exemplars for the development of this project (Minnesota

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Career and College Readiness Collaborative, 2016; AchieveMpls, 2016). The following literature review provides support and evidence for establishing mentorship interventions at the high school level as one way to increase high school graduation rates in students of color, thereby potentially promoting increased application and acceptance into nursing programs.

Literature Review

Stakeholders within the healthcare community concur that recruitment of nurses of color is a priority for the nursing workforce (American Association of Colleges of Nursing, 2015). The establishment of strong personal foundations of self-efficacy in high school through mentorship programs may promote an increased sense of competence and ability in higher education thereby increasing the completion rates and successful transitions to workforce for nursing students of color. The following literature review will review mentoring models for high school students, recruitment techniques used to empower students into healthcare paths and outcomes for programs whose goals include successfully increasing diversity in the RN workforce.

Mentoring High School Students

Creating a mentoring program at the high school level can transform students into successful graduates (Peterson, 2002). High school students have the potential to see themselves in future roles but often need to have access to mentors and role models to be able to project their future selves. Destin & Kosko (2016) indicated that, “A growth mindset toward status is especially important for students from disadvantaged settings because without the belief that social mobility is possible, school can begin to feel useless” (p. 11). The data continues to demonstrate the disparate outcomes of high school students of color when compared to other students who are graduating and successfully entering a career. In one review, Etowa, Foster, Wittstock, & Youden, (2005) reported that black high school students in Canada had more

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specific challenges than non-black high school students entering a nursing profession including insufficient academic preparation, low grades, high drop out rates, lack of awareness of nursing as a career option, limited financial resources for education, social and geographic isolation and other personal and social issues. The authors concluded that programs geared at enriching the academic platform of high school students by providing them with mentoring is more beneficial than at any other age.

While acknowledging that mentorship programs at the high school level are important, understanding how students are recruited to the programs, and more importantly retained, warrants further exploration.

Recruitment and Retention

Programs for mentoring have approached recruitment and retention of diverse high school students interested in nursing in many different ways. In the literature reviewed, techniques of students varied including, researchers casting a wide net and asking the student population to join or other approaches such as having a rigorous application process. Of the programs reviewed, one program, PATHWAYS, only had one requirement, a GPA of 2.0 or higher (Manney & Fonza-Thomason, 2010) while other programs required a specified GPA but also included a student essay (Katz, Smart, & Paul, 2010). In comparison, a study by Timmons (2007) reported on program requiring a GPA of 3.0, parental consent, a means of transportation and accident insurance coverage.

Not all programs are listed as mentorship programs and instead identify as academies or internships. For instance, the Maryvale High School Student Nurse Academy and the Advanced Academic Internship Program had a similar number of requirements but stricter academic requirements (Peterson, 2002). The Nurse Academy had an application process that included a

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transcript review, essay and personal interview. Upon admittance to the program students were expected to sign an attendance contract, miss no more than five afternoon sessions, maintain a B average and refrain from any criminal activity while participating in the program (Peterson, 2002).

The programs reviewed were each unique to the setting and populations that they were recruiting, however, all programs regardless of how they approach mentorship should be able to report the outcomes of the students that participate. Program success rates are discussed next.

Program success. Recruitment numbers and graduation rates do not necessarily measure the successes of many mentoring programs only. For instance, in some programs, the measure of participant evaluation of the program was identified as being an important indicator of program success. In those programs where achievements are the evaluation measure, outcomes of higher academic goals, increased GPA, decreased days absent and decreased dropout rates were reported (Lopez-Bushnell, Gardner, Sanchez, & Miller, 2010; and Peterson, 2002). Programs that reported student evaluation of programs were measured in pre/posttest surveys that indicated a high degree of satisfaction along with high academic success (Lopez-Bushnell et al., 2010).

In one report, success was measured using pretest and posttest surveys of the student's perception of learning. Most students in the study agreed that knowledge and opinion of college and nursing increased after the mentoring program. The improved perception of nursing as a profession, feelings of honor to be a nurse, and reports that nursing would help achieve financial goals like buying a house and a car were noted as being important outcomes (Katz, Smart, & Paul, 2010). In contrast, a different mentor program singularly measured student satisfaction. Pilkington, Singh, Prescod, & Buettgen (2013) identified key themes of a mentor program as being, participatory processes, community engagement strategies, social support and curriculum.

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The authors reported that both mentors and students were satisfied with their experiences in the program. Students found the mentors to be “friendly, supportive and helpful” and felt they were well supported to consider career options and post-secondary education (Pilkington et al., 2010).

Other programs measured success using more concrete data such as NCLEX pass rates. In the Coppin Academy for Pre-Nursing Success (CAPS) for instance, success of their program was measured by following students from the beginning of the program in high school through the students taking their nursing boards. The authors reported that all students from the first cohort successfully passed the NCLEX on the first sitting.

While research on mentoring high school students of color toward a successful nursing career is positive, there are limitations. For instance, two programs cited small sample sizes as a major limitation to evaluating the success of the program (Peterson, 2002; Katz, 2010).

Additional challenges included non-randomized samples, which make it difficult to generalize the results to the larger population and lengthy school board ethics applications limiting the ability to collect sufficient data. There were also reports of difficulties mentoring youth (Pilkington et al., 2013). Pilkington et. al (2013) reported mentors needing to have and maintain an understanding of needs, interests and experiences of high school students which is often time consuming and difficult to do. In general, research with high school students takes longer and is more difficult to gain ethics board approval for research due to their consideration as vulnerable populations and may be a contributing factor to the dearth of literature on high school mentoring programs.

Interventions. Across the literature most of the interventions used to mentor students were similar. Specifically, authors discussed guest speakers, academic support, college preparation, job shadowing, and computer skills as the most used interventions for mentoring

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high school students (Gordon & Copes, 2010; Manney & Fonza-Thomason, 2010; Lopez-Bushnell, 2013; Pilkington et al., 2013). Smith (2013) examined four academic topics: receiving feedback on written assignments, learning how to discuss grades with professors, learning how to participate in a classroom discussion, and learning how to conduct an independent research paper. These topics were chosen because academic success is defined as competency in both verbal and written communication skills (Smith, 2013).

Summary

One major gap consistent throughout the body of literature was that there was a limited amount of research to support the theory that mentoring programs could be successful in increasing high school graduation rates or college graduation rates for students of color. While one study followed students through completion of the NCLEX and reported progression of enrollment for future programs the authors didn't report a sample size making it difficult to evaluate (Gordon & Copes, 2010). Data suggests that more research, including a longitudinal study, is needed to determine whether mentoring programs are successful in increasing the diversity of the RN workforce and what interventions are most helpful in empowering student success. Due to the lack of literature available to assist in determining the structure and function of the proposed mentoring program for this scholarly project, the author took steps to explore the perceptions and desires of the population the project aimed to target. A description of the interviews that took place will be discussed next.

Interviews

Interviews were held with higher education faculty, college and career counselors and a medical career advancement counselor to gain insight into how students could be more prepared and whether or not a mentoring program might be an appropriate avenue to provide these

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interventions. The resounding themes from all interviewees were increased preparation in soft skills, communication skills with faculty, imagery of possibilities, and family role change.

Mentoring programs were supported by each interviewee. A discussion of the themes identified follows.

Themes

Family role change. General feedback included the lack of preparation for family role change. Two interviewees discussed the change of traditional family roles and how students are under-prepared to discuss the role change with family (personal communication, B. Ashland April 20, 2016; S. Beman; April 18, 2016). For example, a student may have the dynamic role of primary caregiver of siblings. The reaction of family members to the change of student's role from caregiver to student can potentially affect their academic success. It was felt that advising mentors to talk to students about the role change and prepare them for a conversation with family was one way in which mentors could assist students in being prepared and ready for the challenges higher education brings (personal communication, B. Ashland April 20, 2016; S. Beman; April 18, 2016).

Imagining the possibilities. Another theme present throughout the interviews was the theme of the student imagining the possibilities. Students are underprepared to ask "what if?" (S. Lehman, personal communication, May 3, 2016) and seek out another answer after an unexpected outcome. For example, a student potentially may not pass a class, or gain entrance into a nursing program. In these situations, mentors are able to help the student understand that there is not just one answer or option, and assist the student in finding another possibility (S. Lehman, personal communication, May 3, 2016). Student's ability to understand that there are

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other possibilities even if the initial option doesn't work out is thought to improve the student's ability to rebound and remain engaged in higher education.

Communication with faculty. Interviewees also felt that students are underprepared to communicate with faculty. Students are waiting too long to discuss difficulties with assignments or when there are other academic challenges (S. Beman, personal communication, April 18, 2016). Intentional advising where advisors seek out students who may need help before there are consequences in the class was one way thought to improve student's success in the classroom while mentoring students in communication skills with faculty, specifically, when to email an instructor, what to say and how to say it was also perceived to be an important area of mentoring and role modeling. Within this same context, one interviewee felt that it was also imperative that students understand what you can and can't negotiate in a class and that there are expectations that must be met to successfully pass a course (B. Ashland, personal communication, April 20, 2016).

Soft skills. Another common theme within the interviews was the theme of soft skills. Soft skills are defined as those that encompass communication, professionalism, leadership and management (Liebrecht, 2016). Interviewees felt that students received technical skills, math and science knowledge, college preparation and assistance with the college application process in the classroom but weren't receiving any assistance with soft skills (A. Peterson, N. Guerin, personal communication, November 14, 2016). Providing opportunities to work on soft skills with high school students to better prepare them for college and life experiences was thought to be a very important area that a mentor program can be helpful in.

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Summary

The echoing themes from the interviewees were that students have technical and academic support within the school system but lack support in other skills. Programs that aim to mentor students on soft skills, communication skills, future insight of likelihood of role change, and imagining the possibilities of change are the interventions that will promote student success. The author categorized the themes for supportive skills and created interventions to support the population the project aimed to target (Appendix A).

Discussion

After a review of the literature and interviews with key stakeholders in the community, a mentoring program for high school youth was deemed to be an appropriate approach to indirectly increasing diversity in the nurse workforce. Providing a mentoring program would allow students the benefit of having role models that support them using a variety of targeted interventions ultimately increasing the likelihood of academic success in their lives. Specifically gearing the mentoring program towards recruiting and empowering students of color to apply to nursing programs is one way to indirectly support the increase in diversity within the nursing workforce, provide the necessary exposure to the possibility of a nursing career, increase their knowledge of what professional nurses do, increase their social support system, and ultimately improve educational outcomes (Pilkington et al, 2013; Manney & Fonza-Thomason, 2010).

In the following sections, a detailed explanation of how a mentoring program, Building Resources, Information, Diversity, Guidance and Encouragement, (BRIDGE), was designed for urban high school students in one MN community.

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Design of Mentor Program

This scholarly project proposes a mentoring program targeting high school students at an urban high school with an interest in nursing. Literature suggests that successful recruitment and retention of minority groups can be accomplished with academic support, mentoring and working with community partners (Phillips & Malone, 2014). The foundation of the program, mentoring, has been supported in literature as an effective way to better prepare students for success. “Early and repeated exposure to nurses, along with age-appropriate discussion of what nurses do, can shape future career choices and, more important, course selections that prepare children for scientific studies” (Samson, 2004). Interviews with higher education faculty, high school career advisors, and a medical career advancement program coordinator led to determine key interventions for the high school students this program targeted.

Throughout the review of literature and discussions with leaders in the education community, themes of mentoring were identified. The needs could be broken down into two groups: hard skills and soft skills; hard skills are defined as the technical skills taught in the classroom, such as math, science, and computer skills and soft skills are social skills, interpersonal skills and communication skills. Leaders consistently advocated for more mentoring of soft skills in comparison to hard skills. Additionally, the hidden curriculum was deemed an important concept to introduce mentees to. According to Smith, 2013, the hidden curriculum is “a set of unwritten norms, values, and expectations that unofficially governs how individuals interact with and evaluate one another (p. 47). Hidden curriculum and soft skills are not traditionally taught in the classroom for two reasons, lack of classroom time and family cultural and social ties. This hidden curriculum is usually learned through family’s cultural and social class backgrounds (Smith, 2013). There is no time to teach soft skills such as hand

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shaking, eye contact and professional communication in the classroom (A. Peterson, personal communication, November 14, 2016). As such, this project includes mentoring to assist students through the hidden curriculum of education with building strengths in the soft skills. The program design is discussed next.

Program Development

Site. The site for the mentoring program was chosen based on student demographics, location and the partnership with a college readiness organization. The urban high school is located two miles from the epicenter of a large metropolitan city. The high school has a diverse student population, not only racially but also economically. Of the total school population, 53% self report as African American and 20% as Hispanic (Minneapolis Public Schools, 2016). The remaining population is white, Asian and Native American, 15%, 8% and 4% respectively (Minneapolis Public Schools, 2016). Project leaders desired bringing the project to a population with the greatest need. While this project could be applied to many area high schools, the targeted school has a greater diverse population compared to the entire school district. See Appendix B for complete breakdown of the student population by designated school compared to the district.

Stakeholders. Stakeholders are individuals and groups that have an interest in the success of the mentoring project. Stakeholders have a critical role in sustain improved outcomes for the intended students of the project (United States Department of Education, 2009). There are many potential stakeholders for the mentoring program: students, parents, teachers, advisors, Minneapolis Public Schools, and many colleges and universities. Schools and community organizations will benefit from improved educational outcomes and community contributions by students (Lopen-Bushnell et al., 2010). Advisors and teachers will benefit with the knowledge

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that students are being taught the hidden curriculum and soft skills there is no time for in the classroom. The project will engage stakeholders by providing results of student's activities and interests.

Several additional considerations went in to the development and design of the BRIDGE mentoring program. A review of the standards, theories, and mentor models that were used as a framework for this project are provided next.

Standards

Nursing is a social, caring, and giving profession. At St. Catherine University there is a deep commitment to social justice. The vision of BRIDGE was created with the Interprofessional Education Collaborative Standards Core Competencies of Interprofessional Collaboration, the American Nursing Association Nursing's Social Policy Statement, and St. Catherine University's mission statement in mind. BRIDGE is utilizing many different social and interprofessional systems to create a meaningful learning experience for students.

According to the Interprofessional Education Collaboration (2011), the cooperation between the professional and educational system is imperative for change in the healthcare field. The American Nurses Association (2010) states that societies determine what skills and knowledge are most needed based on their differences; institutions will then emerge to meet those needs. The mission of St. Catherine University includes equality, leadership, education and teachings (2016). The mission of BRIDGE was created using the above standards. The mission statement for BRIDGE is: *To enhance delivery of compassionate, quality, and diverse local health care by providing opportunities for knowledge, skills and leadership development to Minneapolis high school students.*

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Theory

Possible selves theory. The scholarly project was created using the framework of the theory of possible selves. Possible selves are “hypothetical images” of students that are “critical for motivating action” (Oyserman, Bybee, & Terry, 2002, p. 314). Students who can see themselves in a future role have a decreased chance of delinquent behavior, have improved school outcomes and report feeling more included in school (Oyserman, Bybee, & Terry, 2002). BRIDGE aims to mentor students using various interventions (see Appendix A). The interventions are geared towards facilitating and empowering students to see themselves as healthcare professionals. Interventions by a diverse range of mentors will help create their possible future selves thereby improving student outcomes (Oyserman, Bybee, & Terry, 2002). BRIDGE believes students with positive roles models of nurses, nurse leaders and nurse educators, will positively affect their possible future self-image and thereby affect the nursing practice and nurse education practice.

Visionary leader theory. Change of a system requires vision. The vision of BRIDGE is developed using the four core competencies of the visionary leader: personal mastery, intuition, and reason, shared visions, and team learning (Senge, 1990). The vision statement for BRIDGE is: *Develop a nursing community rich in diversity from local high school graduates to care for a growing culturally diverse patient population.* The core competencies will guide the leadership of BRIDGE by finding a balance between intuition and reason, cohesively keeping the organization unified, and mindfully evaluating the shared vision of all. The program leader believes that these competencies are necessary to model; students will benefit from leaders who work together, and have a shared vision of a more diverse health care field.

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Mentor Model

Network mentoring model. The Network Mentoring Model, according to Haring, is a model that emphasizes interprofessional collaboration and inclusivity within the mentoring relationship (as cited in Smith, 2014). The model realizes that many people contribute in different ways to a mentoring program and that one role may not be the only way to utilize someone best. The model, according to Haring, also states there are no "perfect" matches of student and mentor, giving less emphasis to racial and gender characteristics (as cited in Smith, 2014). BRIDGE aligns with the Network Mentoring Model in the desire to sustain interprofessional relationships with many, for the purpose of improved student outcomes. BRIDGE plans to match students with nurse mentors based on similar interests and backgrounds and not solely on racial characteristics.

Key Features of the BRIDGE Mentor Program

The project began with a discussion between two nurses who work together regarding increasing diversity in their place of work, an emergency department, and volunteering within their shared community, an urban Midwest city. BRIDGE is a mentoring support system for high school students interested in a health care career. The program was designed to meet the academic and social needs of students by giving them skills not necessarily taught in the classroom. BRIDGE meets once a month after school for 45 minutes. Currently, the program does not have academic requirements for participation. Learning opportunities include hands on skills, tours of hospitals, and guest speakers. BRIDGE was implemented to motivate local high school students in the health care field by providing a strong support system based on research and discussions with community leaders.

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Implementation

In the first year of the project, work was done to establish a relationship with the high school and students, and develop project curriculum. Connections were made with a local organization that aims to improve graduation rates and college readiness (AchieveMpls, 2016). The organization works at the high school in the College and Career Center. This career center eventually became the meeting place for students and nurses who participated in the mentoring program. The nurses leading this program held presentations at career fairs to discuss nursing as a profession and build trust with students and a “pizza with the professionals” after school activity to garner interest in the program with local youth. Simultaneously, the nurses leading the program were talking with staff at the high school, college and career counselors, nursing students, and local college faculty to determine appropriate interventions, outcomes and evaluations.

In the second year plans were made for meeting goals, times and duration. Project interventions were developed (Appendix A). The project goal was to hold meetings once a month. It was determined that students who attended three meetings in a row would be eligible for a field trip to either a local hospital or college. Additional recruitment of students involved a short introductory video of the nurses discussing the project, flyers and overhead announcements during homeroom. To date, two meetings have taken place. The first meeting, October 2016, was a question and answer session about the nursing profession, two students attended. The second meeting, November 2016, eight students attended. Students asked questions for 15 minutes and the rest of the time was spent discussing blood pressure. The students watched a 4-minute video of what blood pressure means in relationship to the heart and then every student practiced taking a blood pressure. The third meeting, December 2016, two students attended. Students

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participated in a simulation communication activity. The purpose of the activity was for a student to model communication skills with a teacher in an academically challenging situation. High school students are a challenging population due to busy academic and extra-curricular activities. BRIDGE has modified parts of the program to better meet students needs and will continue to do so as necessary.

Challenges

The implementation of a high school mentoring program does not come without adversity. Increasing diversity in the RN workforce has shown to be rewarding but challenging. The challenge of working with a busy metropolitan student and staff population of public schools has changed implementation timetables and outcomes. Leaders of the program have found program recruitment of students from all grade levels, attendance and maintaining interest for the allotted time also challenging. Many discussions were had between the nurse leaders and high school staff about when to hold the mentoring meetings. Student's school days are full with limited time for added activities. After school meetings seemed like the better option with the only competition being sports. The school day ends at 3pm. The first meeting was held from 3:30-4:30. This initial meeting had 8 students signed up but only two students attended. The project leaders decided that the next meeting should start only 15 minutes after school to increase probability of student attendance. The second meeting started at 3:15 and 8 students attended. While we cannot say that the attendance record correlated to the change in start time, meetings will continue to start at 3:15. During the second meeting, at about the 45-minute mark, student's attention started to become more difficult to capture. In the future, the length of the meeting will be 45 minutes with a question and answer session for 15 minutes after if students desire. Based on the first few meetings, it is apparent that advocating for improvement in soft skills with

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students is not as popular as discussing the technical skills of nursing. The nurse leaders decided to introduce soft skills while teaching technical skills as best able in future skills demonstration. For example, while teaching blood pressure techniques, students will be instructed to simulate a patient and provider role. Instructions will be given to introduce self, make eye contact and talk to the patient through the blood pressure exam. Using this approach will be important for continued recruitment and retention of those interested in participating in this mentorship program. As the program evolves, building of concepts like college readiness and professionalism will be important to promote long-term goals.

Outcomes and Evaluations

The objectives and outcomes of the project aim to encourage students towards the field of nursing and to change the demographics of nurse educators and the practice of nursing education. To assure that the program is meeting its goals, systematic and behavioral expected program outcomes will be measured. Specifically, evaluation of the program will include leadership style, graduation rates, an increase in student's ability to see themselves as nurses, successfully demonstrate knowledge of soft skills, continued interest in the nursing field and a demonstrated positive relationship between mentor and student. Outcomes will be measured using data collection and surveys of students and mentors. A comprehensive list of objectives, outcomes and evaluation methods are located in Appendix D.

Implications

Although the project is in the beginning phases of implementation, implication to the future of the nursing profession can be addressed. The Nurse Educator practice can be positively impacted by the project in many ways. Initially, the Nurse Educator practice will be changed by indirectly increasing the diversity in the nurse workforce by mentoring students of color toward a

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nursing career. Mentors will continue to support students as they pursue higher education. Students will continue to receive encouragement and support in the form of meetings as they navigate higher education for the first time; mentors will continue to remind students of the image of their possible selves as nurses and the importance of continuing the student-mentor cycle.

Additionally, the mentorship program can indirectly increase the number of nurse faculty of color. There is a current nurse faculty of color shortage. In 2014, 12.4% of nurse faculty are faculty of color, which is an increase from 8.7% in 2006 (Zajac, 2011; Wilson, Andrews, & Leners, 2006). Literature suggests that increasing the number of nursing students of color, instituting mentorship programs, and diversifying curriculum are ways to increase recruitment and retention of faculty of color (Zajac, 2011; Childs, Jones, Nugent, & Cook, 2004). The cycle of student - nurse - mentor can also include educator and positively affect the Nurse Educator practice. Mentors will continue to promote education with students as they pursue higher nursing degrees.

The lead nurses of the project anticipate that students will move forward in the nursing career and return to mentor high school students, thus creating a continuation of mentoring. Graduates of the program will become leaders and promote possible selves to the next group of high school students. It is the leaders goal that students will be able to see that they have the potential to be successful in navigating the hidden curriculum, master soft skills, and successfully enter the nursing profession if that is their desired path.

Conclusion

BRIDGE is continuing to evolve as participants and leaders learn from each other. Our dream is that the program meets the needs of our local community and impacts local hospitals

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and clinics. Despite the challenges, the future of BRIDGE as a mentorship program holds many possibilities for students, nurses, mentors, and educators. BRIDGE looks forward to providing role models for students and being a part of growing the future nurse educators, leaders, and health care work force in Minneapolis.

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Appendix A

Intervention	Rationale
Syllabus work	Develop competency in classroom, academic jargon, and abstract directions (Smith, 2016)
Group work	Develop competency in role assignment with peers (Smith, 2016)
Professional skills	Develop competency in verbal and written communication skills with potential professors and managers (Peterson & Guerin, 2016)
Receive feedback on written work	Develop competency in the ability to improve written work based on feedback (Smith, 2016)
Guest speakers	Develop competency to listen respectfully Develop competency to ask appropriate questions that demonstrate comprehension Develop a mindset of future possible self
Family role change	Develop competency in academic expectations and effect on family roles
Campus and off campus navigation	Develop knowledge and skill of social norms of higher education.
Asking what if?	Develop knowledge and skill of how to navigate through the possibility of a mistake.
Discussion of grades and assignments with professors	Develop knowledge and skills to navigate academic culture (Smith, 2014 & Ashland, 2016).

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Appendix B

Student Race	School	District
Native American	4%	4%
African American	53%	39%
Asian American	8%	8%
Hispanic American	20%	18%
White American	15%	31%
Students		
Receive ELL services	27%	19%
Qualify for free or reduced price lunch	86%	62%
Receive special education services	25%	16%

Minneapolis Public Schools. (2016)

Appendix C

SWOT analysis

Internal	Internal
Strengths	Weakness
<ul style="list-style-type: none"> • Consider students who graduate from our program and nursing school to be an ROI[G1] • Free program to students • Accessibility - mentors will come to students • Mentors bring 15+ years of nursing experience • Passion for nursing • Philosophy of inclusion • Tax write off • Mentors approached college from different life places, providing two lenses to share with students • Low cost 	<ul style="list-style-type: none"> • Lack of funding • Start up costs being covered by founding mentors • New program • Lack of diversity of founding mentors • Many factors affecting graduation rates of first generation college students • Continuous change of the needs of students • Lack of competition • Need for volunteers
External	External
Opportunities	Threats
<ul style="list-style-type: none"> • Improved high school graduation rates • Improved relationship between Edison and the health care community • Improved student outcomes • Improved nursing student graduation rates for students of color • Improved self-esteem/possible selves[G2] • Improved social/economic mobility • Students become future mentors • Positive outcomes for patients/hospitals 	<ul style="list-style-type: none"> • Vulnerable to economics • Vulnerable to staff at high school and time sharing • Reliant on volunteer time • Student population/trust building • Parental trust • Negative attention to the high school if program fails

Appendix D: Objectives, Outcomes, and Evaluation Methods

Objective	Outcome	Evaluation Method
Systemic	Systemic	
1. To increase high school graduation rates for students of color	1. Student graduation rate of 100% within 4 years of start of first year of high school.	Data collection
2. To increase knowledge of the health care profession for high school students	2. Students will have increased knowledge of the health care profession by demonstrating technical skills	Data collection, survey pre and post program
3. To increase student hire ability post graduation.	3. Students will demonstrate improvement of soft skills.	Data collection, survey pre and post program
4. To increase diversity in the nurse workforce.	4. Student graduation rate of 85% from a nursing program within 5 years of high school graduation.	Data collection
5. To create a diverse pool of mentors for high school students that share similar backgrounds.	5. Student return rate of 50% to mentor high school students within 2 years of graduation from a nursing program.	Data collection
Behavioral	Behavioral	
1. To increase student’s ability to see their possible selves in a nurse role in the future.	1. 100% of students will report a positive change in possible selves from start of program to end of program.	Survey pre and post program
2. To maintain students interests in the healthcare field throughout the program.	2. 80% of students will report a continued interest in the RN field at time of program completion.	Survey pre and post program
3. To create a meaningful student mentor relationship.	3. (a) 80% of students will report a positive meaningful student mentor relationship at the time of program completion. (b) 80% of mentors will report a positive meaningful student mentor relationship at the time of program completion.	Survey post program completion
4. To promote positive leadership skills.	4. (a)80% of students will reports a positive leadership experience from mentors. (b) 80% of mentors will report a positive leadership experience with other mentors and founders of organization	Survey post program completion
5. To maintain equal vision of BRIDGE to Nursing between mentors, students and founders of organization.	5. 80% of mentors will report continued equality of vision of BRIDGE to Nursing	Survey post program completion

