Racism in Nursing: Research

Thematic discussions on how and where racism shows up in nursing research.

The time is now to expose racism in nursing research. Racism has negatively impacted nurses, nurse researchers, the nursing profession, and patient outcomes. There are a disproportionate number of researchers from racial/minority groups in comparison to white researchers even though there has been growth in registered nurses (RNs) of racially diverse backgrounds obtaining advanced degrees at masters and doctorate levels (NASEM, 2021). Despite a growing number of nurses from racial and ethnic minority groups attaining doctoral degrees, the lack of diversity in leadership -- especially at the executive level -- or at the decision-making table has created systemic and institutional barriers for aspiring and seasoned nurse researchers from minoritized groups. According to the National Institute of Nursing Research (NINR) almost 50% of NINR grant recipients were non-nurses, with White female recipients being and remaining the dominant race and gender (Kippenbrock & Emory, 2021).

In this study sample, Hispanic nurses only represented 6.8% of the NINR grants received, while people who identified as Asians, and Black people and African Americans were the lowest racial categories at 4.1% over the 3-year period. These concerns underscore the need to prioritize research on racism, equity, and health disparities as priority areas of research which would be addressed by increasing diversify funded recipients with a greater number of minoritized researchers to focus on these research areas. Race must be recognized and treated as a sociological construct and removed as a barrier to research from minoritized researchers to address health equity in minorized and socially disadvantaged communities. Unfortunately, nursing research typically focuses on downstream and midstream factors validating the importance of this Commission’s focus on upstream factors.

Dismantling structural racism in nursing research starts with addressing the origins of racism in nursing education. Structural racism has far reaching effects and impacts, ranging from its manifestations in nursing curricula to admission practices (e.g., such as SAT, GRE scores, etc.) that disadvantage students from minoritized and historically disadvantaged groups from entering research training programs (Roberts et al., 2021). Additionally, there is an underlying perception from those who hold institutional power and privilege that minority research studies will not succeed and be impactful, which greatly affects whether the student will seek other experiences or “fly under the radar” to graduate. Racist discriminatory practices and policies that disadvantage racial and ethnic minoritized groups must be eliminated. Traditional research must be disrupted to move past discrete answerable questions using an attainable sample which poses restrictions and fails to address broader issues that are inherent in current policies and practices that limit progression from inquiry to impact (Lyon, 2021). Racism in nursing research, like the broader society, is systemic and pervasive. Racism runs through the entire context rather than appearing in specific places. Focusing on a singular problem without...
looking at greater contexts can and often exacerbates rather than fully addressing policies for sustained change. Research is often based on racist assumptions, with minority health viewed automatically as poor health outcomes with the social construct of race, but not racism, identified as a risk factor for these poor health outcomes. The themes below were obtained from a 9-question survey of nineteen participants (included nurses and nurse leaders from academia and practice) on how racism manifests in nursing research and how it issues can be addressed.

Top themes identified were:

**Lack of funding and access for minoritized nurse researchers.** Funding is fundamental to nursing research that can reset the nursing research paradigm. Minoritized researchers are not awarded funding at the same rate as White researchers which is evidenced in funding preferences (Hoppe et al, 2019). Studies that seem to benefit White populations seem to be preferred, with minoritized populations being listed as risk factors based on race. Federal and private research funding must be increased, focused on the impact of racism in research and interventions and prioritized for early careerists. Funding would also provide support for examining and exploring registered nurses' experience of racism in the nursing workforce and equitable advancement policies and practices to ensure racial/ethnic minority nurses ascend into the higher nursing ranks. Funding also creates an avenue for effective and unconventional partnerships and streams of financial support. Intentional efforts must support studies investigating the impact of racism on nursing education, research, practice, leadership, and health care. Since funding access and support of research for any by minoritized groups are minority research a significant issue, funding bodies and boards who award the funds must have representation from minoritized groups. There must be accountability at all levels. from granting awards to the finished product of the research.

**Systemic and institutional roadblocks with Decision Makers, Institutions, Academia, Publishing and Governmental Agencies.** Racism shows up in career development, funding, education, and conduct of research. More individuals belonging to racial/ethnic minority groups need to be a part of NINR and other funding sources that decide which projects get funded. In addition, people from racial and ethnic minority groups experience hostility in predominantly White nursing schools from White faculty, staff, and students. Black and African American nursing students also experience microaggressions from White students and faculty. Academic institutions must partner with faculty of color, their own diverse university communities, and other key stakeholders to develop plans to create equitable and nondiscriminatory spaces with agency, true intent and initiative (Arnold, Crawford & Khalifa, 2016). Health equity research is more extensive, fully culturally interpreted and understood when people from racial and ethnic minority groups conduct research in communities that reflect their racial and ethnic identities. It also moves the dial from curiosity or a short term “flash in the pan” personal or professional
interest to an actual long-term investment to improve access and outcomes in those communities. There can also be an overemphasis on negative aspects of minority health without a focus on the assets. Upstream impact on nursing research starts with diversifying various decision-making tables of institutions and agencies that educate, cultivate, support, and disseminate nursing research conducted by nurses from racial and ethnic minority groups. It is critical that we acknowledge the interconnectedness of these issues that are part of pervasive racism that is systemic in nursing.

Lack of diversity with Nurse Scientists, Researchers, PWSONs impacting education and mentorship to establish a pipeline. In nursing education, the majority of associate and full professors are non-Hispanic Caucasian females, while Black and African American faculty occupy mainly instructor and assistant professor roles (Aycock et al., 2021). There are systemic barriers that prevent Diverse faculty from ascending to higher levels of leadership in academia. Based on 2016 data from the American Association of Colleges of Nursing (AACN), only 15.9% of full-time nursing faculty come from diverse backgrounds with only 186 professors from minoritized backgrounds compared to 1,827 white professors (AANC, 2017). In a field of predominantly white leaders who are key decision-makers, Hypervisibility (bearing representation responsibility) and Invisibility (lack of acknowledgement by white peers) presents occupational hazards with racial battle fatigue (Cooke et al., 2021). These issues compound a cultural obligation to conduct research that highlight and exposes issues in their own communities but yet feel torn to lose their souls in systems that are hazardous to their health and well-being (Cooke et al., 2021). It is important for racially diverse nurse researchers to conduct research to address health inequities, otherwise methodologies and analyses can become decontextualized, whitewashed, inequitable and mis-framed. How do we have a White female nursing researcher, who lowers her voice when she says the word, "Black", into homes of Black families for qualitative interviews? A lack of racially and ethnically diverse nurse researchers, in turn shrinks the pool of diverse mentors to whet the appetites of future or aspiring nurse researchers from racial and ethnic minority groups. Furthermore, one could argue that the current environment reduces future nurses of racial and ethnic minority groups’ interest in nursing research as a career. Fellowship for minority researchers and junior researchers is necessary so that they can be paired to create culturally sensitive mentorship and strengthen the foundation of research that is of interest to their population of interest.

Devaluing/Hostility and Microaggressions towards minority nurse researchers. The devaluation, covert and overt hostilities, and microaggressions towards minoritized nurse researchers must be understood and addressed. Nurse researchers’ “fly under the radar” survival approach has been normalized for far too long as nurses of color must be psychologically safe to conduct research that is not based on what is tolerable or desirable by decision-makers. There is qualitative evidence of favoritism based on race and ethnicity by non-Hispanic White decision-makers. The opportunity cost of the current system has directly
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impacted the professional and personal lives of nurses and the communities that all nurses
must equitably serve.

Strategies & Next steps
1) Create awareness of Racism in Nursing Research and the impact on health inequities
2) Address upstream-structural-racism by changing policies, diversifying decision makers,
   review panels, committees, and research investigators
3) Direct and provide access to Funding
4) Design antiracist methodology and prioritize research on social determinants of health,
   equity and health inequities and disparities
5) Educate, mentor, sponsor and fund more nurse researchers from minoritized groups

In response to the question “Where Does Racism Show Up in Nursing Research?” we present
key findings and recommendations related to increasing the number of racial and ethnic
minority nurse researchers and advancing an anti-racist nursing research agenda. The
recommendations include:

1) Prioritize funding to support the research career development of current and aspiring nurse
   researchers from racial and ethnic minority groups.
2) Mitigate systemic and institutional practices and policies that adversely influence the
   research career development and trajectories of nurse researchers from racial and ethnic
   minority groups.
3) Increase the number of racial and ethnic minority nurse researchers; and
4) Eradicate hostility and micro aggressions toward racial and ethnic minority nurse
   researchers.

When addressing these recommendations, it is imperative that diverse stakeholders (i.e., no
matter the race or role) work in tandem to mitigate racism across the entire nursing research
continuum and alleviate the impact of racism on the research interests, efforts, and career
trajectories of nurse researchers from racial and ethnic minority groups. To identify where
racism shows up in nursing research one must simultaneously acknowledge the existence of
racism in nursing education and practice. The implicit acceptance, thus complicit support, of
racism in our society is engrained in the institutional fabric of nursing and evident in nursing
research. Increasing the number of nurse researchers from racial and ethnic minority groups is
critical for addressing racism across the research continuum, advancing nursing science, while
reflecting the composition of the U.S. population, and improving the health outcomes of
diverse populations. Survey findings revealed a lack of funding to support the career
development of nurse researchers from racial and ethnic minority groups who are poised to
pursue or advance a nursing research agenda. Thus, one recommendation is for federal and
private grant funding agencies to prioritize funding to support the research career development
of current and aspiring nurse researchers from racial and ethnic minority groups. This is particularly important for early-mid career nurse researchers from racial and ethnic minority groups. As funding organizations (federal and private), nursing research societies and others express an interest in increasing diversity and inclusion programs and calls for proposals should reflect a commitment to enhancing racial/ethnic diversity in the research pipeline as one strategy to help inform, implement, evaluate, and disseminate research using an anti-racist lens. We need more initiatives that focus on supporting the research career development of minority investigators such as the NINR previously funded “Mentored Research Scientist Development Award for Minority Investigators”. This will encourage the development of qualified racial and ethnic minority nurse investigators in research settings who in turn can serve as role models and mentors for nursing students belonging to racial and ethnic minority groups. The NINR Strategic Plan Working Group Draft Framework is another example where dismantling structural racism will be critical for advancing nursing science and supporting the research career development of racial and ethnic minority nurse researchers at each career stage (NINR, 2021).

**Funding agencies, academic leaders, journal editors, grant reviewers, and other key decision makers** should commit to mitigating systemic and institutional practices and policies that adversely influence the research career development and trajectories of racial and ethnic minority nurse researchers. Our survey findings revealed that racial and ethnic minority nurse researchers encounter barriers when proposing research projects, which include a focus on structural racism or other topics of systemic oppression or inequities. During the grant review process, there are concerns that some reviewers issue unfavorable reviews because they focus on the topic (e.g., racial issues) instead of the science of the actual proposal. Funding agencies and organizations should quickly institute a strategic vision and plan that incorporates principles and practices that support anti-racist research and research review agenda. These barriers coupled with the lack of appropriate mentorship diminish a racial and ethnic minority nurse researcher’s ability to establish a program of research compatible with their commitment to reduce health disparities and achieve health equity.

**Removing systematic and institutional policies and practices** that perpetuate racism across the entire research continuum is critical for ensuring that racial and ethnic minority nurse researchers secure promotions in academia, sustain a program of nursing research and scholarship, and receive recognition for their unique contributions to advancing nursing science.

Some barriers to pursuing a research career may manifest during the admission process when the GRE® is required to enter a doctoral nursing program. Increasingly some graduate programs have reconsidered this requirement citing concerns about diversity and the exam’s poor ability to predict success, both of which are of concern for underrepresented minorities (URMs). Some nursing programs have adopted a holistic approach to nursing school admissions, emphasizing
equity and diversity and less emphasis on the traditional test scores as a requirement for entry into a program (AACN, 2020; Glazer, 2015). The adoption of a holistic admissions framework at the doctoral level has the potential to increase the numbers of URMs seeking admission into a PhD nursing program, the research career degree in nursing. Further, the adoption of holistic admissions frameworks for entry level nursing degrees can increase the pipeline of racial and ethnic minority nurses prepared to enter Ph.D. nursing programs.

Noting the importance of disseminating scholarly publications, journal publishers have instituted new guidelines for writing, reviewing, and publishing scholarly work in recent years. For example, in 2021, the journal “Advances in Nursing Science” issued new author guidelines to include an antiracist framework for scholarly publications and resources. These guidelines benefit all researchers who conduct research with racial and ethnic populations. We anticipate that other publishers will institute similar guidelines for writing and publishing scholarly work.

The recommendation to increase the limited numbers of racial and ethnic minority nurse researchers is, in part, dependent on the success in addressing the recommendations mentioned above. In support of this recommendation, it is essential to acknowledge that racism shows up beginning in nursing education. For some racial and ethnic minority nurses, racism shows up when they receive counseling to pursue a diploma or an associate degree in nursing vs a baccalaureate degree in nursing. This negatively affects an applicant’s potential exposure to nursing research presented during BSN or graduate education. This lack of exposure to research early in the educational process can limit exposure to nurse researchers who are advancing nursing science and can serve as role models and mentors for aspiring nurse researchers. Numerous authors have provided exemplars of programs and models focused on exposing students to nursing research as one strategy to increasing the pipeline of racial and ethnic minority nurse researchers (Goepinger et al., 2009; Kim et al., 2009; Leeman et al., 2003; Stanfill et al., 2019; Wallen et al., 2005). Increasing the awareness of nursing research and facilitating exposure to nurse researchers, especially for aspiring racial and ethnic minority nursing students can stimulate interest in pursuing a nursing research career. Such efforts have the potential to translate into better health outcomes for some of our most economically and disadvantaged marginalized populations. Notably, the Executive Summary of the NINR Pathways Work Group Report supports the early exposure to nursing research and its impact on patient outcomes. This is particularly important for undergraduate racial and ethnic minority nursing students.

Requisite to increasing the number of racial and ethnic minority nurse researchers is the need to understand the challenges racial and ethnic minority nurses face when pursuing research careers. Devaluing hostility and microaggressions towards racial and ethnic minority nurse researchers, our final recommendation, is critical for addressing racism across the nursing research continuum. Often, racial and ethnic minority nurses avoid nursing research
because of institutional and interpersonal barriers, which depict nursing research as daunting and unattainable. In many settings, most experienced senior nurse researchers are White. This can leave prospective racial and ethnic minority nurses, in need of mentorship and research opportunities, alone to work with senior researchers who lack skill in best practices that facilitate successful cross-cultural mentorship. Racial and ethnic minority nurse researchers can find themselves as recipients of microaggressive or macroaggressive behavior and toxic or hostile environments. Such environments force well positioned racial and ethnic minority nurses out of nursing research. Increasingly as more schools and colleges of nursing employ Associate Deans of Diversity, Equity and Inclusion, there is movement to implement and monitor antiracist policies, practices, and faculty training as well as create environments where all students, faculty, and staff feel included, valued, and respected. For example, schools and colleges of nursing should institute mandatory education on implicit bias, individual and institutional racism, anti-racism, and other forms of inequities as a key component to these efforts. Ro and Villarreal (2021) recommended creating a functional department level diversity committee, incorporating implicit bias into faculty training, and developing an anonymous reporting system as important strategies to combat microaggression in academia. In summary, we need a well prepared and supported anti-racist workforce of racial and ethnic minority nurse researchers to begin to dismantle, reimagine, and redesign the nursing research agenda to truly reflect the diversity of our society.

High level Conclusions

- Racism will show up wherever it is given space, time, and energy. The nursing profession has both actively and passively contributed to racism in healthcare.
- Prioritize anti-racist nursing research and funding to support the career development of racial and ethnic minority nurse researchers.
- Findings from research that addresses racism is nursing should be disseminated, translated and incorporated in nursing practice.
- Prioritize and utilize update research and evidence to inform our nursing practice and policies.
- Keep the topic of racism and its legacy of harm on the radar for academic disciplines and programs, not solely schools of nursing.
- Eliminate racist and discriminatory practices and policies that disadvantage people from racial and ethnic minority groups.
- Nurses from racial/ethnic minority groups are underrepresented in leadership roles, especially at the executive level. As such, organizations must take measurable and monitored steps to increase multi-level representation of leaders from these groups, and, as importantly, ensure inclusion and equity practices.
• Make evaluation of work (dissertations, research projects, etc.) have embedded structures of evaluating whether racist structures are contained within the writing, theories, questions, etc.

References


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