



ADVANCING HEALTH EQUITY IN NURSING EDUCATION

FUTURE OF NURSING™
Campaign for Action
AT THE CENTER TO CHAMPION NURSING IN AMERICA

MOMENT OF SILENCE

PROGRAMS AND PRESENTERS:

The Social Mission of Associate Degree Nursing Programs

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- Rick Garcia, PhD, RN, FAADN, The Organization for Associate Degree Nursing

Hitting the Bullseye on Structural Racism in Nursing Education

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THE SOCIAL MISSION OF ASSOCIATE DEGREE NURSING PROGRAMS

The George Washington University and The Organization for Associate Degree Nursing



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The Organization for Associate Degree Nursing

DESCRIPTION OF PROGRAM

This collaborative project centered around the administration of a **social mission self-assessment survey** to **associate degree nursing** program leaders across the country in order to provide a mechanism to assess their program's social mission and **benchmark** it to national norms.

PROJECT GOALS

1. Implement the SMM Self-Assessment with OADN member programs.
2. Develop a baseline for social mission in ADN programs.
3. Provide program specific benchmarking.
4. Elevate the social mission conversation among ADN programs.

SOCIAL MISSION DEFINITION

The contribution of the school in its mission, programs, and the performance of its graduates, faculty and leadership in advancing health equity and addressing the health disparities of the society in which it exists

—Dr. Fitzhugh Mullan

SUCCESS IN MEETING GOALS

- Conducted an internal review of the SMM instrument to ensure ADN applicability.
- Successfully disseminated the survey to OADN member schools with 44 completed responses.
- Developed a national baseline for social mission in ADN programs.
- Provided confidential benchmarking reports to participating programs.

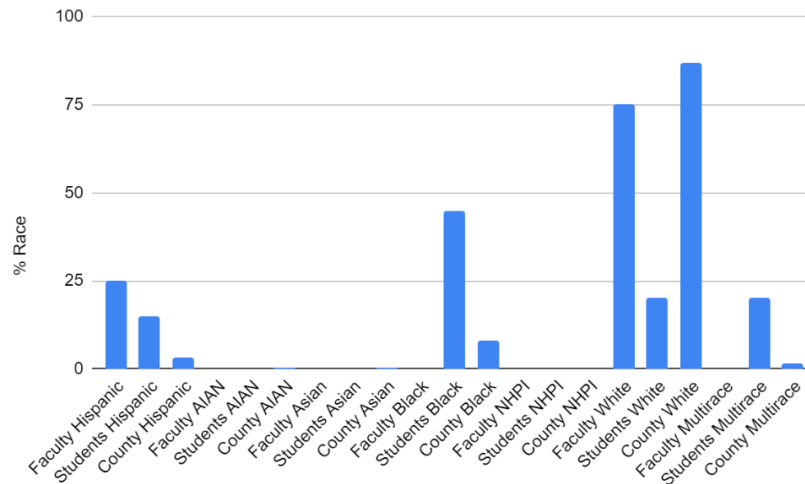
FEEDBACK REPORTS

	Social Mission Area	Rating	Questions
Area 1	Curriculum and Extracurricular Activities	★★★★★	B3, B4, B5, B6, B7, B8, B9, B10
Area 2	School mission	★★★★★	C1, C2
Area 3	Curriculum and community needs	★★★☆☆	D1
Area 4	Community collaborations	★★★★★	E1, E2
Area 5	Student diversity	★★★★★	F1, F2, F3, F4, F5, F6, F7, F8, F9, F10, F11
Area 6	Faculty diversity	★★★★☆	G1, G2, G3
Area 7	Leadership diversity	★★★★★	G4, G5, G6, G7
Area 8	Pathway/pipeline programs	★★★☆☆	H1, H2, H3
Area 9	Training for a culture of inclusion	★★★☆☆	I1, I2
Area 10	Student activism	★★★☆☆	J1, J2
Area 11	Faculty activism	-	K1, K2

Note: Results for individual areas were divided into Quartiles. The Top Quartile is the highest quartile and the First Quartile is the lowest quartile. Areas in which a substantial number of questions were left blank on your survey were not scored.

FEEDBACK REPORT

Information below depicts the diversity of your school, as reported in 2023, compared to Census data for Virginia. Review the information to see the relationship between student, faculty, and community diversity.



Race	Students	Faculty	County	State
American Indian/Alaska Native	0.00%	0.00%	0.50%	0.60%
Asian	0.00%	0.00%	0.50%	6.80%
Black or African American	45.00%	0.00%	7.90%	20.00%
Hispanic or Latino	15.00%	25.00%	3.10%	10.50%
Native Hawaiian or Other Pacific Islander	0.00%	0.00%	0.10%	0.10%
Two or More Races	20.00%	0.00%	1.70%	5.60%

FEEDBACK REPORT

2 School Mission

Results for this area are based on whether or not a school's mission statement and strategic plan had an explicitly stated "community of commitment." Community of commitment was defined in the survey as "a medically or socially underserved community—this could be an underserved geographic area, demographic group, or category of patient—that your school has explicitly targeted as a focus of your work."

Resources:

- [The Social Mission in Medical School Mission Statements: Associations With Graduate Outcomes](#) (Morley et al., 2015)
- [Mission and Vision Toolkit](#) (MITRE Corporation)

Examples in practice:

- [California State University-San Bernardino, Department of Nursing mission statement](#)

3 Curriculum + Community Needs

Results for this area were based on whether the school (or its partners) has a formal or informal Community Health Needs Assessment and how this assessment informs the school's curriculum.

Resources:

- [Principles to Consider for the Implementation of a Community Health Needs Assessment Process](#) (Rosenbaum, 2013)
- [Community Health Assessment Toolkit](#) (AHA Community Health Improvement)
- [2022 Community Health Needs Assessments and Implementation Strategies](#) (Kaiser Permanente)

Examples in practice:

- [Teaching Community Health Needs Assessment to First Year Medical Students: Integrating with Longitudinal Clinical Experience in Rural Communities](#)

Social Mission Commitment in Associate Degree Nursing Programs

“**Social mission**” refers to the commitment of a health professions institution to advancing health equity and addressing health disparities in the community it exists.

44 Associate Degree Nursing programs reported their commitment to social mission using the previously developed Social Mission Metrics Self-Assessment



Curricular Design

The majority of schools had courses related to social mission

- Social determinants of health
- LGBTQ health
- Advocacy
- Public Health



Admission Policies

37%

had a holistic admission policy

Private institutions were more likely to require anti-bias training for admission committee members than public institutions



Faculty & Leadership

62%

had majority female leadership

44%

had LGBTQ+ representation in leadership



Pathway/ Pipeline Programs

70%

offered pathway programs for K-12 students

Public institutions were more likely to have and provide internal funding for pathway programs



DEI Training

DEI training was completed more often among faculty than students

- Unconscious/ Implicit Bias
- Cultural Intelligence
- Anti-racism



Community Involvement

The majority of schools did not provide financial support to community activities related to the social determinants of health

PROMISING PRACTICES

Broad Partnerships and Reach

- Collaboration with leaders from NYSAC, OADN and stakeholders from outside of nursing – The Fitzhugh Mullan Institute for Health Workforce Equity, and Social Mission Alliance.
- Participation from 44 programs across 25 states, 45% of which were community colleges.
- Diverse representation helped shape survey design and dissemination efforts.

PROMISING PRACTICES

Insights from the Study

- 95% of programs included curricular content on social determinants of health (SDOH).
- Only 37% had holistic admission practices; 46% required anti-bias training for admissions.
- Public institutions demonstrated stronger social mission performance than private ones.
- Smaller programs excelled in integrating equity-focused content into curricula.

PROMISING PRACTICES

Impact Stories

- Feedback reports served as a living document for program evaluation.

“So. Rest assured that this [report] is not just being kept in a folder. This will be a living document. ... I aim to be a department chair...every time we do a total program evaluation we have to take a look at this document”

- Survey spurred institutions to actively engage with the concept of social mission.

“I felt like it was a need to complete your assessment so that I could aid in the increased development of this topic at different nursing schools. So I don't know that we were actively thinking about [social mission] [prior]”

- Resources provided were timely and aligned with institutional goals.

“The resources that came back with the feedback, I've absolutely loved and was very helpful and timely.”

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LESSONS LEARNED

- Sensitivity to DEI-related terminology is crucial due to changing educational policies.

“there was recent legislation...that is not allowing a diversity office but we did have one before, I think. The purpose of that group is still the same, that hasn't changed, but, [it's no longer] labeled in that way.”

- Timing of surveys should align with academic schedules and other requirements to improve response rates.

“There are things that have to be done, like clearing students for clinical, but when I'm doing that, I can't be forming these partnerships and I can't be implementing initiatives like this. I can't because I don't have the time.”

“ I think [the survey] was really easy to fill out ... I had most of the information because we needed for our reporting to our accreditation agencies.”

- Highlight benefits of participation - provided resources and potential for learning collaboratives.

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LESSONS LEARNED

Post-Project Plans

- Continue refining and disseminating the SMM self-assessment.
- Expand survey implementation to include other health professions programs - recently distributed to medical schools.
- Foster collaboration between public and private institutions to share best practices.
- Seek financial support to sustain research efforts and promote equity-driven initiatives.

LESSONS LEARNED

This analysis provides a framework for future initiatives aimed at strengthening the social mission of nursing education while addressing barriers to diversity, equity, and inclusion. These findings pave the way for continued collaboration between institutions, stakeholders, and policymakers to drive impactful change.

HITTING THE BULL'S EYE ON STRUCTURAL RACISM IN NURSING EDUCATION

Utah Action Coalition



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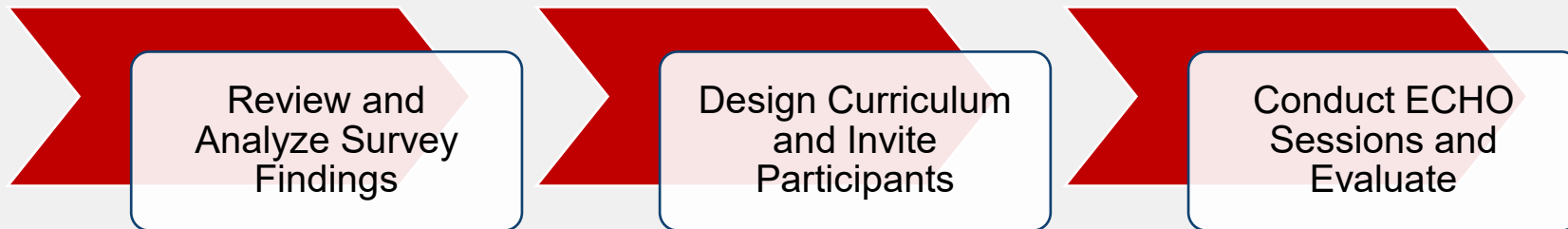
Vernell DeWitty

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Pourquis Diversity Consulting

“HITTING THE BULL’S EYE” DISMANTLING RACISM IN NURSING EDUCATION

PROCESS



DESCRIPTION OF PROGRAM

ECHO SESSIONS

Session I: Introduction to ECHO

Session II: Inclusive Learning Environments

Session III: Fostering Student Belongingness

Session IV: Allyship in Nursing Education

Session V: Faculty Recruitment and Retention

Session VI: Action Planning and Reflection

OUTCOMES

PRE AND POST SESSION KNOWLEDGE

Table 1. Prior knowledge

	Frequency	Percent	Valid Percent
Moderately knowledgeable	51	68.0	68.0
Very knowledgeable	12	16.0	16.0
Slightly knowledgeable	7	9.3	9.3
Extremely knowledgeable	4	5.3	5.3
Total	74	100.0	100.0

Table 2. Post session knowledge

	Frequency	Percent	Valid Percent
Very high	53	70.7	70.7
Extremely high	16	21.3	21.3
Neither high nor low	5	6.7	6.7
Total	74	100.0	100.0

ABILITY TO IMPLEMENT NEW SKILLS

N=74 : Representing 4 Nursing Schools

Table 3. Implement new skills and methods

	Frequency	Percent	Valid Percent
Very likely	69	92.0	92.0
Somewhat likely	5	6.7	6.7
		1.3	1.3
Total	74	100.0	100.0

CONFIDENCE

Table 4. Confidence in ability

	Frequency	Percent	Valid Percent
Significantly	42	56.0	56.0
Moderately	32	42.7	42.7
Total	74	100.0	100.0

PROMISING PRACTICES

Change in Practice

- *“Asking myself and my students to reflect on what they hear; does it ring true to the lived experience of the person?”*
- *“Decide to speak up - take courage.”*
- *“I will have discussions with my clinical students about the bias they observe, as well as help them explore their personal biases.”*
- *“Adjusting what I talk about with my students during post-clinical conferences to include what they would do differently if they witness these types of scenarios.”*

LESSONS LEARNED

Diversity, Equity & Inclusion Work in 2025

- The values of the nursing profession have not changed.
- Nurse educators need *specific skills* to enable new nurses to care for diverse populations in complex health systems with compassion and empathy.
- Adapting quickly to a fluid policy environment is key.
 - Policy changes at the state and federal levels will have chilling effects on this work
 - ~~Eliminating, Dismantling, Building Bridges to Health Equity~~

QUESTIONS