



Diversity Plan for Maryland's Nursing Workforce

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Introduction: Nursing represents the largest sector of the health profession with over three million registered nurses across the nation. As we consider our country's aging revolution, and an ever increasing diverse population, the larger question that must be answered is what role can and will nursing assume in meeting the increasing demand of an older, more diverse, population. It will be those who are most underrepresented and most vulnerable who will have the greatest need for safe, efficient, effective, and quality health care services. A patient interacting with a healthcare provider is both a private and personal relationship. This relationship is not only about medicine. As those in need of healthcare become more diverse, understanding their total being-their values and beliefs, and having a greater sense of cultural competence will prove to make a significant impact in providing effective healthcare. While no one single group will be the majority, in the next 25 years, "minority" populations will become the majority in the United States.

Problem Statement: Relevant research by the AACN supports that Nursing education in the 21st century must address quality improvements in education, inequities in healthcare, and enhanced civic readiness and engagement potential of our nursing students. Diversity in the nursing workforce, inequities and disparities in healthcare threaten our well-being as a country. This project will make use of several cultural competence models, coupled with understanding the phenomena of care.

Methodology and Approach-Strategic Planning: The goals of this presentation are twofold. First, this presentation will report out on the efforts to date in the development of this strategic initiative and planning process for diversity and inclusion in Nursing. Additionally, this presentation will develop, outline, and propose a strategic planning framework which can be used as a statewide resource for Nursing.

Conclusion: We have been conditioned as people and organizations and a society that diversity is by and large about race, and gender differences. As much, we have been conditioned to believe that healthcare delivery is about medical appointments, premiums, pharmaceutical sales and proper dosages. Today, we want to begin to unlearn and reprogram our thinking, and make clearer that diversity, inclusion, effective, and quality healthcare delivery includes and involves much more than what we have been conditioned to believe as necessary and true. It requires a more in-depth understanding of ourselves, our beliefs, our belief-structure, and truly embracing and understanding at a more in-depth level, the cultural beliefs and values of those to whom healthcare is provided. This work is funded through a State Implementation Project awarded by the Robert Wood Johnson Foundation and AARP.