MA Action Coalition Diversity and Inclusion Plan

MAAC Vision for Diversity

Since it is the vision of the Massachusetts Action Coalition (MAAC) to be the national model for nurses leading, advocating, and partnering to boldly reshape delivery of high quality, patient-centered health care, the Diversity Advisory Group offers this Diversity and Inclusion Plan to help in this bold agenda.

Definition of Diversity

The concept of diversity encompasses acceptance and respect. It means understanding that each individual is unique and recognizing our individual differences. These differences can be along the dimensions of race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, religious beliefs, political beliefs, or any other aspect of identity. It is the exploration of these differences in a safe, positive, and nurturing environment. It is about understanding each other and moving beyond simple tolerance to embracing and celebrating the rich dimensions of diversity contained within each individual.

Diversity is a reality created by individuals and groups from a broad spectrum of demographic and philosophical differences. It is extremely important to support and protect diversity because, by valuing individuals and groups free from prejudice and by fostering a climate where equity and mutual respect are intrinsic, the diversity agenda can move forward.

"Diversity" means more than just acknowledging and/or tolerating difference. Diversity is a set of conscious practices that involve:

- Understanding and appreciating interdependence of humanity, cultures, and the natural environment;
- Practicing mutual respect for qualities and experiences that are different from our own;
- Understanding that diversity includes not only ways of being but also ways of knowing;
- Recognizing that personal, cultural and institutionalized discrimination creates and sustains privileges for some while creating and sustaining disadvantages for others;
- Building alliances across differences so that we can work together to eradicate all forms of discrimination.

Diversity includes knowing how to relate to those qualities and conditions that are different from our own and outside the groups to which we belong. Diversity acknowledges that
categories of difference are not always fixed but also can be fluid, respecting individual rights to self-identification and recognizing that no one culture is intrinsically superior to another. (The above is adapted from CUNY Queensborough Community College’s “Definition of Diversity,” http://www.qcc.cuny.edu/diversity/definition.html)

Goal

The goal of this initiative is to reflect the diversity of Massachusetts’ population throughout the nursing workforce, in leadership levels as well as direct care roles, across all practice settings and throughout nursing education. Priority groups for our work include race, ethnicity, gender, and age.

MAAC is focused on immediate actions as well as strategies and tools that will sustain long-term change, building a culture of health with culturally congruent care while diversifying our nursing workforce. The Diversity Advisory Group will be the catalyst to insure this change and has identified three pillars for action.

Pillar of Leadership

- Diversification of MAAC leadership
- Diversification of MAAC project teams
- Leadership development for the diverse nurse

Examples of current best practices in leadership programs

- ONL Leadership Academy (four-day workshop over two months): The Organization of Nurse Leaders of MA & RI (ONL) offers a multi-faceted executive style program based on the ONL Leadership Development Model;
- Leadership seminars made possible by the Joyce Clifford Endowment to help develop aspiring nurse leaders of the future;
- The Hausman Program at Massachusetts General Hospital (MGH) is focused on bringing more diversity to the workforce at MGH.

Suggested strategies

- Create in-house fellowship programs to promote diversity so that progress can be monitored and encouraged;
- Encourage nursing CEOs to encourage staff nurses to pursue leadership programs in-house and outside;
- Develop mentorship programs for aspiring leaders within the organization where the mentors are nurse leaders from within the organization;
- Establish partnerships with diverse professional organizations for aspiring nurse leaders (for example, the National Association of Hispanic Nurses Chapter’s Aspiring Leader Fellowship in Appendix & Resources section);
- Utilize the list of identified New England Regional Black Nurses Association’s Excellence Nominees and Awardees to continue development of future leaders (Appendix & Resources);
- Become familiar with other diverse professional organizations (Appendix & Resources)
Pillar of Practice

MAAC will encourage organizations to adopt a philosophical commitment to diversity that encourages inclusivity and culturally congruent care.

- MAAC will encourage employers to administer diversity and inclusion climate surveys to their nursing staffs.
- MAAC will encourage employers across all practice settings to identify, develop, and promote workforce diversity policies, practices, and plans to foster diversity and inclusion in all direct care delivery and supervisory roles.
- MAAC will encourage all levels of nursing (administrators, directors, nurse managers, and staff nurses) to participate in the diversity conversation.

Examples of current best practices in practice settings

- The Nursing Career Lattice Program at Boston Children’s Hospital (BCH) targets employees of color and employees from lower socio-economic status who are not registered nurses and BCH diverse nurses who hold an Associate's Degree in Nursing and want to go further their nursing education by obtaining a Bachelor's degree in nursing.
- A partnership between Roxbury Community College (RCC) and Brigham and Women’s Hospital (BWH) has a goal to increase the number of diverse nurses who are employed by BWH.

More information on these initiatives is in the Appendix & Resources section.

Suggested strategies--Strategies should be focused on encouraging inclusivity and culturally congruent care.

- Encourage organizations to include nurses from management, education, and practice in the conversation;
- Encourage organizational assessment to identify and evaluate models of inclusivity at all levels including management, education, and practice;
- Encourage organizational assessments to identify and evaluate cultural congruence in the provision of nursing care to patients and clients;
- Encourage organizations to use the Workforce Diversity Toolkit-Resource for Employers (in Appendix & Resources)
- MAAC will encourage organizations to adopt a model from the literature to guide the work, e.g. Madeleine Leininger (in Appendix & Resources)

Pillar of Education

The Diversity Advisory Group recognizes that MAAC’s goal of increasing the percentage of nurses educated to the baccalaureate or higher from its present 55% to 66% by 2020 must reflect a renewed commitment to increasing the diversity of the nursing workforce. Of the
44,535 nurses surveyed in Massachusetts in 2010, the following demographics were self-reported: 83% white, 4% black, 3% Asian, 2% Hispanic. The most recent Board of Registration in Nursing (BORN) data will inform our work going forward.

Examples of current best practices in educational settings

- Dotson Bridge and Mentoring Program supports students of color in the undergraduate and graduate nursing programs at Simmons College to graduation and success on the NCLEX.
- A partnership of Fitchburg State University (FSU), Worcester State University (WSU) and three vocational technical high schools has developed a LPN-to-BSN program.
- Fitchburg State University (FSU) has introduced a nurse education program for military veterans. FSU plans to develop a bridge program for military-trained LPNs to enter the LPN-to-BSN program, providing a pathway into practice.
- Holyoke Community College is partnering with Elms College’s four-year nursing program, which includes an accelerated LPN-to-BSN model that will enable LPNs to graduate with a BSN in five semesters.

Suggested strategies

Nursing education is where the preparation for entrance into the profession begins. Schools of Nursing should develop strategies that:

- Take advantage of the diverse pool of Associate Degree and Licensed Practical Nurse graduates to accelerate their education to a BSN degree or higher;
- Are intentional in finding ways to recruit, support, and retain diverse students so that they successfully graduate and pass the NCLEX.
- Address both the academic and non-academic challenges that diverse students face. Academic challenges include, but are not limited to, challenges with test taking and oral and written challenges for non-native English speakers. Non-academic challenges include, but are not limited to, education financing, child care, transportation, and housing;
- Institute mentoring programs for their diverse students;
- Increase the numbers in the pipeline of diverse students pursuing advanced practice nursing;
- Increase the pipeline of diverse students pursuing faculty positions;
- Recruit and retain more diverse faculty members and develop pedagogies that are sensitive to diverse students;
- Develop and implement strategies and programs to inform, influence, and support the success of middle- and high school-age students, students in LPN and ADN programs, and non-nursing students to pursue nursing as a career and to accelerate their progression to the BSN level or higher;
- Develop and implement strategies to tap into the diverse pool of nursing assistive personnel.
The Diversity Advisory Group

MAAC convened the Diversity Advisory Group (DAG) in May 2014 with membership from employer, practice, and academic settings. See membership list on page 7 for details. The DAG’s goal is to share its members’ perspectives and expertise as diversity is incorporated into all parts of the MAAC agenda. The group will collaborate with the MAAC leadership by focusing on this important and necessary agenda.

The DAG will endeavor to meet the objectives of the MAAC agenda including, but not limited to, focusing on:

1. the current “state of the state” of nursing diversity in Massachusetts with respect to the 2010-2012 collection of data (as referenced above) and anticipation of the release of more data from the BORN being conscious of the goals of the MA Plan for Academic Progression;
2. the identification of best practices to increase the numbers of diverse nursing leaders;
3. the identification of best practices in education and practice that address diversity, inclusion, and cultural competence;
4. the guidance in continuing strategic planning and implementation of the diversity plan.

Based on a preliminary analysis of student pipeline data, the MAAC project the following targets for annual improvements in the diversity of the MA BSN prepared nursing workforce:

- Non-White Diversity – 1% annual increase starting in 2016;
- Male Diversity – 0.5% annual increase starting in 2016;
- Age diversity – Increase the percentage of BSN RN’s who are 35 or under.

The DAG will support the efforts of MAAC as it builds on the existing Massachusetts Diversity Pipeline and push to increase diversity at the BSN degree and RN employment levels. Currently, LPNs and students in two-year nursing programs are more diverse than the population that earns BSN degrees or the currently employed (“incumbent”) RN population.

Data from the Boston Public Schools indicate the pipeline is even more diverse at the high school level. In 2000 the overall white population dropped to 69% from 80% in 1980. This is countered by a rise in census data for Black, Hispanic, and Asian populations. The future nursing workforce will be drawn from this growth. There is no alternative.

The following table shows the demographics of the Boston Public School system in 2013-2014.

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<thead>
<tr>
<th>Percentage</th>
<th>Population</th>
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<tr>
<td>40%</td>
<td>Hispanic</td>
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<tr>
<td>35%</td>
<td>Black</td>
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<td>13%</td>
<td>White</td>
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<td>9%</td>
<td>Asian</td>
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<td>3%</td>
<td>Other</td>
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The next table shows the demographics for students who live in Boston but do not attend the Boston Public School system. These students may attend parochial school, private school, etc.

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<tr>
<td>45%</td>
<td>Black</td>
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<td>17%</td>
<td>Hispanic</td>
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<tr>
<td>32%</td>
<td>White</td>
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<tr>
<td>4%</td>
<td>Asian</td>
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<td>3%</td>
<td>Other</td>
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These data represent the student pool from which local college campuses will draw their future applicants for nursing school. It is expected that this pipeline of more diverse individuals, especially males, African Americans, and Hispanics, will have a gradual diversification effect over the next few years. However, it is not enough to simply wait for this natural diversification to occur. Massachusetts must work to be more inclusive, (especially of males, African-Americans, and Hispanics) at the BSN and RN levels generally, and in terms of leadership.

The table below shows the targets the MAAC has set for pushing to increase diversity at the BSN, RN and LPN levels. All of these targets represent “added value” to what will be occurring in our state naturally – that is, they are intentionally set higher than where natural progression will likely move us. The table also shows how we will be prioritizing male, African-American, and Hispanic diversity, as those are Massachusetts’ three most underrepresented populations at the BSN, RN, and LPN levels.

### Estimated Diversity Increases in BSNs Earned, and LPNs or RNs Employed

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<th>BSN Estimates</th>
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<tr>
<td>Total</td>
<td>2,388*</td>
<td>2,736</td>
<td>2,863</td>
<td>17,620**</td>
<td>19,020</td>
<td>19,580</td>
<td>87,520**</td>
<td>88,640</td>
<td>89,088</td>
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<tr>
<td>Male</td>
<td>198 (8%)</td>
<td>246 (9%)</td>
<td>272 (9.5%)</td>
<td>1,586 (9%)**</td>
<td>1,900 (10%)</td>
<td>2,056 (10.5%)</td>
<td>6,126 (7%)**</td>
<td>7,091 (8%)</td>
<td>7,573 (8.5%)</td>
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<tr>
<td>Minority</td>
<td>427 (18%)</td>
<td>533 (19.5%)</td>
<td>597 (21%)</td>
<td>3,524 (20%)</td>
<td>4,279 (22.5%)</td>
<td>4,902 (23.5%)</td>
<td>9,627 (11%)</td>
<td>11,966 (13.5%)</td>
<td>12,918 (14.5%)</td>
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<tr>
<td>Asian</td>
<td>112 (5%)</td>
<td>150 (5.5%)</td>
<td>157 (5.5%)</td>
<td>176 (1%)</td>
<td>285 (1.5%)</td>
<td>294 (1.5%)</td>
<td>2,626 (3%)</td>
<td>3,102 (3.5%)</td>
<td>3,118 (3.5%)</td>
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<tr>
<td>African American</td>
<td>196 (8%)</td>
<td>233 (8.5%)</td>
<td>258 (9%)</td>
<td>2,643 (15%)</td>
<td>3,043 (16%)</td>
<td>3,231 (16.5%)</td>
<td>5,251 (6%)</td>
<td>6,205 (7%)</td>
<td>6,682 (7.5%)</td>
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<tr>
<td>Hispanic</td>
<td>119 (5%)</td>
<td>150 (5.5%)</td>
<td>182 (6%)</td>
<td>705 (4%)</td>
<td>951 (5%)</td>
<td>1,077 (5.5%)</td>
<td>1,750 (2%)</td>
<td>2,659 (3%)</td>
<td>3,118 (3.5%)</td>
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* Degree data from the Integrated Postsecondary Education Data System.

## Diversity Advisory Group Membership

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<tr>
<th>Name</th>
<th>Organization</th>
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<tbody>
<tr>
<td>Judith Cullinane, MSN, RN, CCRN</td>
<td>President, MA Chapter of National Hispanic Nurses Association</td>
<td>The Floating Hospital for Children; Simmons College; Dotson Bridge &amp;Mentoring Program</td>
<td>Professional Development Director, Pediatrics; Associate Professor of Nursing Practice</td>
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<td><a href="http://www.massnahn.webs.com">http://www.massnahn.webs.com</a></td>
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<tr>
<td>Earlene Avalon, MPH, PhD</td>
<td></td>
<td>Children's Hospital</td>
<td>Director of Nursing Diversity Initiatives</td>
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<td>Boston</td>
<td><a href="http://publichealth.tufts.edu/About-Us/Earlene-Avalon">http://publichealth.tufts.edu/About-Us/Earlene-Avalon</a></td>
</tr>
<tr>
<td>Margaret R, Brown, MS, PMHCNS-BC</td>
<td>Immediate Past President, New England Regional Black Nurses Assoc.</td>
<td>All Care Homecare, LLP</td>
<td>Clinical Nurse Specialist</td>
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<td><a href="http://mrbrown1949@gmail.com">http://mrbrown1949@gmail.com</a></td>
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<tr>
<td>Deborah Washington, RN, PhD</td>
<td></td>
<td>Massachusetts General Hospital</td>
<td>Director of Diversity for Patient Care Services; Diversity Advisory Group, MAAC NERBA-Health Policy</td>
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<td>Leticia C. Hermosa, JD, PhD, MSN, RN</td>
<td>President Philippine Nurses Association of America</td>
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<tr>
<td>Jerry Browne, RN, BSN</td>
<td>President, American Assembly for Men in Nursing, New England Chapter</td>
<td>Massachusetts General Hospital</td>
<td>MGH Cancer Center</td>
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<tr>
<td>Gloria Cater, PhD, FNP, RN</td>
<td>Member New England Regional Black Nurses Assoc.</td>
<td>Simmons College</td>
<td>Dotson Program Faculty</td>
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<td>Roxbury Community College</td>
<td>Dean Emerita</td>
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MORE DETAIL ABOUT EXAMPLES OF CURRENT BEST PRACTICES

Organization of Nurse Leaders Leadership Academy
Aimed at new and aspiring leaders, its purpose is to develop and continuously expand knowledge, practice, and character of nursing leadership for the benefit of patients and nurses across the state. We work with members of the Diversity Advisory Group to target the recruitment of diverse nurses to participate in the program. The program curriculum includes a module on diversity in the workforce and how to lead in an appropriately diverse organization. This initiative also includes mentoring, planning and pilot projects to establish best practices for future use by others.

http://www.oonl.org/leadership-academy

Amanda Stefancyk-Oberlies is the contact person

The MGH Diversity Program exemplified through the Hausman Program has the following components:

Hausman Fellowship Program
The Hausman Fellowship Program at Massachusetts General Hospital (MGH) is a clinical practice and leadership development program that supports the cultural norms of each minority senior nursing student. Through experiential clinical practice, reflection, advocacy skill building and interpersonal engagement with staff; Hausman Fellows learn the skills needed by minority nurses to succeed and contribute to the organization through exemplary patient care informed by cultural precepts. The program accepts minority nursing students from local schools of nursing and from across the nation. They gain more clinical experience as well as mentoring from minority staff nurses and educators. The unique outcome of this program is that students understand the importance of their cultural identity in the practice environment, not only to their benefit, but also to the benefit of ethnic minority patients. These students are taught to use their culture-based knowledge to increase patient engagement and to educate staff with cultural information in a peer support environment. The students rotate through inpatient units, ambulatory care, community health centers and engage in service learning opportunities. To date, the first four participants in the Hausman Fellowship Program are all in graduate school pursuing MPH, DNP, and NP advanced education. All have plans to practice in the minority community. One key advantage to more diversity in nursing is those minorities nurses, themselves, often live in communities designated as underserved and are motivated to be change agents. As nursing continues to advance the concept of expanding scope of practice, a desirable outcome is that advanced practice clinicians of color will be the most likely to provide primary care in the neighborhoods of their cultural identity and about whom even now they have personal knowledge and affinity based relationships. The return on investment for approximately $4,000/student is significant for impact on the underserved.
Accent Reduction Program

The Accent Reduction Program is for nurses with English as a second language who self-refer for services. As a quality and safety issue, those who self refer express concerns about clarity of speech over the phone and during in person communication with patients and families.

Minority Nurse Research Program

The Minority Nurse Research program is specifically for minority staff nurses who want to pursue their interest in research. The two current participants are pursuing their PhD and DNP degree. The first research project is focused on the question: How long are minority new grads unemployed compared to nonminority new graduates.

Dr. Deborah Washington is the contact person.

Children’s Hospital Nursing Career Lattice Program

The Nursing Career Lattice Program is an initiative at Boston Children's Hospital designed to increase the racial and ethnic diversity of its nursing staff to create a strong multicultural workforce that will provide the best family-centered care to BCH’s patients and community. The Nursing Career Lattice Program is able to provide employees with one-on-one mentoring, academic counseling, and financial support needed to successfully complete nursing school. By participating in the program employees receive the following services:

- An individualized plan to support and guide each employee through the college experience, with an emphasis on work/life balance.
- Access to Boston Children’s Hospital nursing staff who serve as role models and mentors.
- Opportunities for a reduced work schedule to devote time to educational commitments.
- Financial assistance, if applicable, in the form of tuition vouchers and stipends to offset the costs associated with buying textbooks, nursing uniforms and other equipment.
- Opportunities to connect with other members of the Nursing Career Lattice Program.

The Lattice Program targets both BCH employees of color and employees from lower socio-economic status who are not registered nurses and BCH’s diverse nurses who hold an Associate's Degree in Nursing and want to go further their nursing education by obtaining a Bachelor’s degree in nursing.

Dr. Earlene Avalon is the contact person.

Roxbury Community College/Brigham and Women’s Hospital Partnership

Roxbury Community College identifies diverse graduates who maintained a 2.8 GPA, have passed their NCLEX, and are enrolled in a Baccalaureate Nursing Program. Brigham and Women’s provides these students a stipend, mentoring from one of their nurses of color, and the promise of employment after their graduation. The first cohort of six students has finished the program, and all have been hired by Brigham and Women’s. A second cohort of students has been identified.

Dr. Jacqueline Somerville is the contact person
**Dotson Bridge and Mentoring Program**

The Dotson Bridge and Mentoring Program was made possible by a gift from the Dotson Family. The overarching goal is to enhance the educational experience and success of African-American, Latina, Asian, and Native American (ALANA) students enrolled in the program. The nursing literature has shown that there are both academic and non-academic barriers to success for nursing students. The Dotson Program seeks to help students identify and overcome these barriers. The program began in 2009 with six mentors and 18 students. Presently there are 18 mentors and more than 80 students. Graduation rates and NCLEX scores have shown great improvement. Each student has a mentor and also has access to many workshops, i.e. Test-Taking Skills, Study Skills, Medical Terminology, etc. Even though the focus is on the success of students of color, all students are welcome to attend any of the workshops or study groups that are offered.

Dr. Judy Beal is the contact person.

**Fitchburg State University (2 programs)**

In 2012, Fitchburg State University (FSU) received a grant and worked in partnership with Worcester State University (WSU) and three vocational technical high schools to develop a LPN-to-BSN program. The pilot program offered a seamless academic progression pathway, giving academic credit to LPNs as they began their BSN program. The diversity of the LPN workforce is much higher than the incumbent ADN workforce where FSU also focuses its efforts to increase the percent of BSN or higher degrees. This LPN-to-BSN program offered at both FSU and WSU is now in its second year. At the time of their grant report, a cohort of 14 at FSU was projected to begin BSN courses in September 2013 and a cohort of 15 is expected to begin at WSU in September 2014. There is great interest in these new opportunities and FSU expects to see growth across the Commonwealth as the program is shared and replicated and we will be tracking the data.

With support from the Department of Higher Education in 2014, Fitchburg State University introduced a new program for military veterans. They will develop a bridge program for military-trained LPNs to enter the LPN-to-BSN program providing a pathway into practice. FSU expects that these graduates will be well positioned for future employment in the Veterans Health Administration facilities across the Commonwealth and add diversity to our nursing workforce. In central Massachusetts, more than 120,000 men and women receive care through the VA. Project outcomes will be broadly disseminated and should be easily replicable.

Linda McKay is the contact person.
Holyoke Community College

Holyoke Community College was also funded by a DHE grant supporting work on academic progression in an urban region (Springfield) that needs nurses and where the students are representative of a more diverse population. Holyoke Community College is partnering with the four year nursing program at Elms College that has an accelerated LPN-to-BSN model that will allow LPNs to graduate with a BSN in 5 semesters.

Karen Hankel is the contact person

Workforce Diversity Toolkit: Resource for Employers (under separate cover)

Anne Chineny Nsonwu. Pat Crombie is the contact person

A Sampling of Professional Organizations for Diverse Groups

- National Association of Hispanic Nurses [www.nahnnet.org & www.massnahnboston.com]
- Association of Latino Professionals for America, www.alpfa.org
- New England Regional Black Nurses Assn., [www.NERBNA.org]
- American Association for Men in Nursing [http://aamn.org/aamn.shtml]
- Philippine Nurses Association [http://www.pna-newengland.org]
- National Medical Association [http://www.NMA.org]
- National Association of Black Social Workers [http://www.NABSW.org]
- National Black MBA Association [http://www.NB MBA.org]
- National Society of Black Engineers [http://www.NSBE.org]
- National Association of Black Journalists [http://www.NABJ.org]
- Historically Black Colleges and Universities [http://HBCUconnect.com]
- Asian Women in Business [http://www.AWIB.org]

A Sampling from the literature on Diversity, Inclusion, and Cultural Competence


There are also many images on Google.com for diversity and inclusion models