

The Breakthrough to Nursing column presents ideas and perspectives about the importance of cultural diversity in nursing and general recruitment into nursing.

by TJ Tekesky Breakthrough to Nursing Director



On August 28, 1963, thousands of civil rights supporters marched on Washington, DC, where Dr. Martin Luther King, Jr. described a possible future of racial harmony in his most famous speech, "I Have a Dream." The fall 1963 issue of the NSNA News Letter (the precursor to Imprint), featured the following observation:

It was a memorable summer - 1963. The pace of civil rights activities quickened. All of us became more aware of the issues and the urgency of thinking, speaking, acting in the effort to resolve them. The Civil Rights march in Washington...was an unforgettable climax. Some of NSNA, ANA, NLN, and AJN company were part of the March.

For those who could not be there, it seemed important that we add a few words to the chorus—for ourselves, for our organization, for the profession. This telegram was sent to President Kennedy on August 28: 'Representatives of the... [NSNA]...voice heartfelt commendation of your determined and courageous stand to achieve full and equal rights for all American Citizens. We are grateful for your efforts to abolish now and forever unjust racial discrimination. We concur completely with the position of our parent organization...[ANA]...against any form of racial bias.'

To commemorate the 50th Anniversary of the March on Washington, we present this article that traces the origins of Breakthrough to Nursing.

The 1960s were a time of hope and rage in the United States. This was also a time of revelations, revolutions, and regrets. Within a *five-year* span, Americans struggled to come to terms with the assassinations of three national leaders. On November 22, 1963, John Fitzgerald Kennedy, 45, president of the United States and architect of the New Frontier, was killed by a bullet fired from a building along the president's parade route in Dallas, TX. On April 4, 1968, Reverend Dr. Martin Luther King Jr., 39, father of nonviolence in the American civil rights *movement*, was struck by a bullet as he stood on the balcony of a motel in Memphis, TN. Then, on June 5,1968, Senator Robert F. Kennedy, 42, while thanking supporters for his *victory* in the California presidential primary, was shot in the head at the Ambassador Hotel in Los Angeles, CA, and died the next day.

Two main issues defined this decade: the war in Vietnam and civil rights. These two issues contributed to an ideological schism that separated the American people and to a conflict of generations for American college and university students. Perhaps due to restrictive nursing school policies, nursing students did not become visibly engaged in the anti-Vietnam War movement. However, the civil rights movement presented unique challenges and opportunities for nursing student involvement through NSNA.

NSNA, established in 1952, was a thriving and vital organization by 1960. Student leaders were mentored and guided by the top echelon of the American Nurses Association (ANA) and National League for Nursing (NLN) leadership. They had a sound organizational structure, a competent staff, headquarters, equipment, and faculty support. They were eager, idealistic, and curious. The transient nature and time limitations of being a full-time student required quick learning so that goals could be met in a short period of time. This transient membership, however swift, permitted nursing students to create a meaningful community of student leaders. NSNA staff and advisors provided the continuity needed to sustain projects. The opportunity for NSNA to make a significant impact on nursing education during this decade was unparalleled in the history of the profession.

In 1960, there were 118,849 nursing students enrolled in 1,137 nursing programs, and 80,000 belonged to NSNA. By the end of the decade, there were 1,343 nursing schools, 164,545 nursing students enrolled, and 59,149 NSNA members. In 1962, dues were raised from fifty cents to one dollar; in 1967, they were raised to two dollars; and in 1969, to five dollars. Human and financial resources were available to conduct business and act on important issues.

(Continued on page 16 ❖)

(Continued from page 15)

NSNA was well-positioned to be in the vanguard of the coming surge of social consciousness among the nursing student population. By the mid-1960s, NSNA had become deeply involved in social issues, and in 1971, the association received funding from the Division of Nursing, National Institutes of Health, and the United States Department of Health, Education, and Welfare, for the Breakthrough to Nursing Project.

NSNA's interest in recruiting nursing students into the profession began long before this federal support. In 1954, the nursing profession was faced with a critical shortage. NSNA responded by establishing a "Committee on Careers" and appointing an NSNA representative to serve on the NLN Committee on Careers. NSNA had a valuable resource to offer the committee student contacts at state and district levels of the association. It was felt that student nurses, being close in age to those they were targeting, could be effective recruiters. Hundreds of Future Nurse Clubs, such as "Daughters of Florence Nightingale," "The Clara Barton League," "Future White Caps," and Nursettes of Tomorrow," to name a few, had been established in secondary schools throughout the country. NSNA members would prove to be valuable in reaching these high school and junior high school students.

With the passage of Brown vs. Board of Education of Topeka, Kansas, in 1954, many educators as well as the public became acutely aware of efforts to integrate schools, especially in the deep south, where it was met with fierce opposition. This Supreme Court ruling invalidated the 1896 decision in *Plessy vs. Ferguson* upholding "separate but equal" facilities. Separate schools for blacks and whites were now unconstitutional. In October 1956, the NLN committee began addressing issues related to new supplies of nursing students and raised the question, "What limitations, based

on factors such as marriage, age, sex, and racial origin, should schools be encouraged to modify or remove?"

NSNA leaders realized that they needed to address the many barriers that prevented qualified students from entering and graduating from nursing school. In addition to academic standing, admission policies were restricted based on marriage, age, gender, and race. In 1950, the percentage of nonwhite nurses to the total nurse population was reported as 3.5% by the Bureau of the Census. Admission of blacks to nursing schools was 3.2% in 1960, and in the fall of 1962, 82% of schools reported that they had a policy to admit students regardless of race. A survey conducted by the NLN in 1963 reported that the number of black students admitted into all associate degree, baccalaureate, and diploma programs constituted 3% of the total number of students admitted to the schools reporting, and that the percentage of those actually enrolled was 2.7%. Almost 52 % of the blacks admitted to nursing schools cited in this study were admitted to predominately black programs. The number of blacks admitted to nursing programs was lower in 1960 than it had been in 1950, even though their population had increased. The closing of many predominately black nursing programs resulted in limiting the access of blacks to professional nursing.

By 1963, the NSNA Committee on Careers had fostered the development of state and local involvement in recruitment. The need for nurses continued to rise, and in 1961, the military pressed nurse volunteers to serve in the armed forces in response to Communist tensions in Cuba and Berlin. In a report entitled, "Toward Quality in Nursing: Needs and Goals," published by the Surgeon General's Consultant Group on Nursing in 1963, it was estimated that "graduations from schools of professional nursing must increase by 75% to a total of 53,000 per year to meet minimal goals for 1970." One fifth of all

professional nursing positions were vacant in 1962, 58% of nurse educators lacked graduate degrees, and 11% of budgeted faculty vacancies were unfilled.

A special report of the 1964-1965 NSNA Nursing Recruitment Committee announced that the committee would implement some of the recommendations in the Surgeon General's report. The report stated that, "Restrictions on admission of certain groups to nursing schools result in serious loss to the profession. Men, married women, older women, and members of certain racial groups, particularly blacks, are not accepted by all schools." The Recruitment Committee determined that removal of restrictions in admission policies needed to be combined with intensive recruitment efforts specifically geared toward these groups.

Actions taken at the November 1964 meeting of the NSNA Nursing Recruitment Committee changed the course of nursing recruitment. This meeting marked the beginning of a nationwide project that would eventually be labeled, "Breakthrough to Nursing." Fresh on the heels of the passage of the Civil Rights Act of 1964, signed by President Johnson in July, the NSNA Nursing Recruitment Committee developed a comprehensive plan to address the recruitment of minorities into the profession. Working closely with the NSNA Board of Directors, the Committee on Recruitment prepared a resolution to bring before the 1965 NSNA House of Delegates to make minority recruitment a national project. The following resolution was passed by the House of Delegates on May 2, 1965:

Therefore be it resolved that the National Student Nurses' Association, Incorporated, in convention assembled ... adopt as its national project: 1) Involving nursing students in improv-



ing the position of disadvantaged groups in society; 2) Further involving present members of NSNA and other nursing students from disadvantaged groups in the work of the association; and 3) Recruiting members of these groups into nursing.

The 1965-1966 NSNA Nursing Recruitment Committee was empowered with the task of implementing the resolution. With guidance from Frank Stanley, representing the Urban League, and Dr. Elizabeth Carnegie, a black nursing leader, the committee developed strategies to involve all NSNA members in the national project, develop models, and collect data. Approaches were devised to reach college-bound racial minorities and interest them in nursing. State. and district national project committees were established.

In an effort to target black students to enter nursing, NSNA members served as tutors for primary and secondary school black students. They helped obtain and complete applications for nursing school, and guided students once they were admitted.

They developed numerous routes of reaching minorities through urban leagues, coalitions, community agencies, school districts, church groups, and Head Start programs, libraries, and guidance counselors.

Members of Future Nurse Clubs were encouraged to focus on recruiting minority students. Local contributions and grants were solicited to offset expenses. Nursing school admission policies were questioned, and local committees worked with directors of nursing schools, state nurses associations, and state leagues for nursing to get them changed.

In 1967, the first three target areas were selected for a new phase of the NSNA's National Project Breakthrough to Nursing. The Board pushed hard to interest members in Breakthrough to Nursing. Because interest was slow and resources scarce, the board targeted cities to concentrate its energies. In 1971, the Breakthrough to Nursing Project received federal monies to expand the number of target cities, hire field and headquarters staff, and strengthen

an already established structure for minority recruitment. Funded target areas included: Phoenix, Los Angeles, Denver, Columbus, and Charlotte. Non-funded areas included Alabama, Idaho, and Illinois.

Recruitment of minorities into nursing exposed NSNA members to inequities that cut through to the core of American society. They saw the hopelessness of indigent populations, including children, and the flagrant failure of the health care system to address human needs, and challenged NSNA's leaders to take on social issues. NSNA members worked in collaboration with community groups, government agencies, and students in other health professions to provide services directly to people in their homes.

NSNA achieved national recognition for its efforts. In 1970, the Breakthrough to Nursing Project was nominated for the American Nurses Association Mary Elizabeth Mahoney Award, which recognized significant contributions to advancing equal opportunities in nursing to minorities. The Project added six new target areas that same year. Several NSNA representatives attended interdisciplinary meetings, conferences, and symposia, and also volunteered in Appalachia and participated in the Job Corps Summer Fellowship Program. A cadre of nursing students was fighting in the war on poverty and prejudice, and fervently believed that every nursing student had a responsibility to make the world a better place. ∞

This article is adapted from "The **Role of the National Student Nurses'** Association in Addressing Social and Political Issues that Contributed to Student Unrest from 1960-1975" (Teachers College Columbia University, 1995), the doctoral dissertation of Diane J. Mancino, EdD, RN, CAE, FAAN. Dr. Mancino is the Executive Director of NSNA. References available upon request.

