

## **“I Don’t Know If I Can Make It”: Native American Students Considering College and Career**

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### **Abstract**

Nursing, as other health professions, needs to increase the diversity of its work-force to reflect the growing diversity of the U.S. and to improve health disparities. The purpose of this study was to identify culturally relevant factors affecting young Native American high school students’ intention and ability to attend college and pursue a career in nursing. The objective was to gain deeper knowledge about students’ perceptions about college and nursing to contribute to the scant literature on recruiting and retaining Native American students in nursing. A qualitative interpretive descriptive methodology based on Native American educational and nursing theory was used. Data collection included open-ended interviews with 21 high school students attending a summer residency institute for high school students interested in college and nursing. Three themes related directly to the research questions revealed that participants expected to go to college, needed emotional and financial support, and were uncertain about nursing as a career. Three additional themes emerged from participants’ discussion of their families and included racism. Native American and other minority students with high drop out rates, low college attendance and completion rates, who wish to enter health careers not only need improved preparation for college, assistance with finances, cultural support, but frequent

family contact and support, reliable and stable family situations, and role models and mentors.

### **Keywords**

Culture, Native American, recruitment and retention, workforce, diversity in nursing

Native American youth are described by tribal elders as “the hope and future,” and as “the priority of education and research” in rural tribal communities (Katz, Martinez, & Paul, 2010). Yet, Native American youth suffer from health and education disparities that impede their future success. High suicide rates, substance abuse, mental illness, morbidity and mortality from motor vehicle accidents, along with low high school and college graduation rates go hand in hand (Faircloth, & Tippeconnic, 2010; Goodkind et al., 2010; Walters, Simoni, & Evans-Campbell, 2002). A person with a good education is more likely to be healthy (Writ, Choy, Rooney, Provasnik, Sen, & Tobin, 2004) and those with good health are more likely to attain a good education (Weaver, 2009). Students that experience high stress are more likely to drop out of school, and among Native American pop-

ulations, this stress is related not only to socioeconomic and health disparities, but to unique cultural factors, historical trauma, and discrimination (Walters et al., 2002).

A four year quantitative descriptive pre/post-test study to determine Native American high school students' perceptions about college and nursing careers demonstrated that students intended to attend college and learned to consider nursing as a profession that would give them financial security and respect from their tribes. Study participants were Native American high school students attending a one week summer residency nursing careers program. In the study's second year, qualitative interviews were conducted to increase the depth of understanding about students' experiences and to modify the pre/post-tests. Survey modifications made from the interview results included adding questions to address concerns that college was too far from home, that students needed emotional support, and that they might not feel prepared for college (Katz, 2007; Katz, Smart, & Paul, 2010). In addition to pre/post-test modifications, interview results uncovered student issues that went beyond, yet affect, students' consideration of college and career. The results of the interviews were notable for several reasons. First, they made an argument for mixed-method research design by emphasizing the importance of qualitative methodology to obtain participant point of view that could be missed using quantitative data. Second, they contributed to modification of the survey instrument to increase validity. Finally, from a counseling and education perspective, they demonstrated the need to address psychological stress, including substance abuse among students and their families, before, or at least in conjunction with, college and career preparation.

The purpose of this article is to report the

qualitative study and results that argue for addressing psychological and behavioral concerns of culturally diverse students in tandem with college preparation and career information.

The term Native American is used in this study rather than American Indian/Alaska Native because it is used most often among the people represented by this study. Indigenous is used to relate to Native people from locations outside the US.

### **Background**

Strategies for recruiting minority students into college and careers have been developed primarily from studies in the United States (U.S.) with non-Native American minorities or white students (Dower, McRee, Briggance, & O'Neil, 2001; Matutina, Newman, & Jenkins, 2010). Few studies include American Indian/Alaska Native (Native American) participants, or internationally, Indigenous or Aboriginal students, despite the need to address significant educational disadvantages and low numbers in the health professions (Bessent, 1997; Juntunen, & Cline, 2009; Stevens, & Walker, 1993). Native American nurses represent 0.4% of the RN population, while Native American people make up 1.5% of the U.S. population (U.S. Health and Human Services, 2006). However, fewer than 65% of Native American students graduate from high school compared to 75% of the general U.S. population, and only 9% graduate from college compared to almost 20% for the U.S. population (Indian Health Service, 2001; Warne, 2006). Native American students are unique and research is needed to increase our understanding of what helps or hinders college and career success. This study, in conjunction with a quantitative descriptive study, explored the perceptions of Native American high school students about going to college and into a nursing career.

College recruitment and career studies

demonstrate significant differences between minority students and their white peers. Differences include:

1. Cognitive factors. Grade Point Average (GPA) may be less correlated to college success than stress related to culture and ethnicity (Manifold, & Rambur, 2001; Pollard, Kuiper, & Meredith, 2010; Tate, & Schwartz, 1993, Weaver, 2001).
2. Family support and high expectations. High expectations decrease high school drop out rates and increase likelihood of college attendance and success (Demmert, 2001). However, Navajo students showed that mothers' attitudes about education were more important than other family members (Willeto, 1999).
3. Family ties. Native American students may be less likely than white students to pursue college because of deep family ties that make leaving home to attend college difficult (Katz, 2005; 2007).
4. Academic preparation, finances, and difficulty adapting to college life. These key factors were found to impede student success in a survey of 30 colleges serving a large portion of Native American students (Wells, 1997).

Poverty, single-parent homes (less than half of youth living in rural areas live with a parent), and high levels of substance abuse and violence make Native American students at greater educational risk than other groups in the United States (Henson et al., 2002). In addition, lack of exposure to others with college or health profession degrees by Native American students living on reservations may hinder in college and career decisions (Keltner, 1999; Martin, 1991). Role models have been seen as key to Native American students making decisions to become nurses (Keltner et al., 2001; Plumbo, 1995; Yurkovich,

2001). In a study of Native American students attending a summer nursing institute taught by Native American nurses and nursing students, students changed their views of nursing as a career by seeing that they could become financially secure and be important to their tribes (Katz, 2007).

Programs that focus on increasing Native American nurses in the U.S. include the Recruitment/Retention of Native Americans into Nursing (RAIN) at the University of North Dakota; the Caring for Our Own (CO-OP) program for Native American students at Montana State University; and Alcance, Na-ha-shnee, and Creating a Nursing Path at Washington State University. For example, Na-ha-shnee, a week long 'camp' experience for high school students interested in nursing, changed attendees' perceptions, knowledge, and attitudes toward nursing and college (Katz, 2005). Partnerships between tribes and the university are facilitated by the Plateau Tribes Center. The center is designated to work with local tribes through a memorandum of understanding (MOU) that includes supporting tribal students applying and enrolling in the university (Inglebret, & Pavel, 2007). In Canada, a 20-year-old program in Saskatchewan, Native Access Program to Nursing, recruited and retained thirty-five First Nations nursing students in 2003. The program provided support, cultural activities, accessibility and flexibility, and help finding students summer employment. Students reported that the positive atmosphere enabled them to succeed (Arnault-Pelletier, Brown, Desjarlais, & McBeth, 2006). Many programs in Canada offer reserved enrollment for Aboriginal students (Gregory, 2007).

International and U.S. literature is growing in regards to recruitment into college and health careers. Cultural considerations appear in research with Indigenous populations of the U.S., Australia, and among largely Muslim cultures

within Kuwait (Al-Kandari, & Lew, 2005; Orchard, Didham, Jong, & Fry, 2010). Studies have been conducted to determine high school students' interest in college and careers, and factors that influence career choice, but none offer deeper insight than qualitative methodology, about the thoughts of Native American students, whose low rates of graduation from high school and even lower rates of graduation from college, make them scarce in careers such as nursing, and scarcer still in leadership roles, academia, and research. Gaining an understanding of how different student populations experience attending school and choosing careers within the context of their culture and community can advance education, career development, and nursing science (Juntunen & Cline, 2009; Mulholland, Anionwu, Atkins, Tappern, & Franks, 2005). The three research questions guiding this study were: 1) What are students' perceptions about going to college; 2) What do students think about a career in nursing; and 3) What influences or barriers affect students' consideration of college and nursing careers?

### **Theoretical Framework**

The framework that guided this study was Lowe and Struther's (2001) model 'Nursing in Native American Culture'. The model provides a caring and holistic lens to understand Native American students' perspectives as they consider college and nursing careers. Seven themes connect and describe principles used by Native American nurses: 1) caring, 2) traditions, 3) respect, 4) connection, 5) holism, 6) trust; and 7) spirituality. A caring stance was necessary to interview and work with Native American adolescents and a holistic view gave the researchers an opportunity to design a study that respected multiple perspectives of participants from different ethnic and generational backgrounds. The use of a Native American nursing model, rather

than a career development or education model, and the qualitative phenomenological methodology, were chosen to fit the Native American Education Research Agenda that calls for bringing the voice of Native American people and students into research projects (Lomawaima, & McCarty, 2002; Stang, Von-Glatz, & Hammer, 2002).

### **Methodology**

This phenomenological study used a descriptive qualitative design with interpretive underpinnings to gain an understanding of Native American high school students' perceptions of going to college and becoming a nurse. The descriptive qualitative design was chosen to present an account of the relevant phenomenon of interest (Sandelowski, 2000). For this study, the phenomenon of interest was participant perceptions regarding going to college and becoming a nurse. The descriptive qualitative design was useful in this area, where not much was known about the phenomenon, and where straightforward answers were sought to provide direction for future studies or policies. In addition, and consistent with Sandelowski's work on descriptive qualitative research, an interpretive perspective can inform aspects of a descriptive study, in this case, data analysis. The interpretive perspective was based on the work of van Manen (1990; 2002), whose hermeneutic approach originates in European and North American philosophy, specifically from the Dutch school of thought. Van Manen's pedagogical research approach begins with empirical experience, in this case the students' experiences, moves to reflection on those experiences during the interviews, and finally to interpretation through analysis and writing.

### Setting and Sample

The setting was a week-long residency program for Native American high school students to educate them about nursing careers, going to college, and the practice of nursing. The purpose of the program was to increase the number of Native American students going to college and choosing nursing as a career. During the program students stayed in a college dormitory where initial 'getting to know you' exercises were held along with evening cultural activities, including a nightly 'talking circle' lead by the program director, a member of the Nez Perce Tribe. The program curriculum included didactic and experiential content about nursing and Native American cultural dimensions of health. Recruitment for the institute occurred in several states and included high schools and community career and health fairs. The director of the institute was responsible for determining acceptance based on a minimum grade point average of 2.0 and an essay describing the applicant's interest in college and nursing. Program participants were chosen from applications made to the program director who made admission decisions and sent a description of the study and a parental permission form with the acceptance packet.

All students attending the institute could volunteer for the study. These participants brought relevant and rich perspectives on the phenomenon of interest (Sandelowski, 2000), in

this case the perspectives of Native American high school students considering college and nursing. The participants were also chosen for convenience because rural reservation dwelling adolescents are difficult to access. Parental (or legal guardian) permission forms and an explanation of the study were included in the materials sent with the institute acceptance letter. Upon arrival at the institute, students with parental permission were asked to voluntarily sign an assent form. Institutional review board approval was obtained through the region's Indian Health Service Board and through the investigator's institution.

### Data collection

Semi-structured interviews with open-ended questions were conducted at the start of the week and lasted from thirty minutes to an hour. Interviews were conducted at the dormitory where the students resided. These were taped and later transcribed. Attempts were made during the interviews to establish rapport in order to foster openness and thereby garner detail-rich data (Bogdan, & Biklen, 1982). The interview style was conversational, with questions interjected to clarify and expand information. At the end of the interview, each participant had time to talk about the interview process and ask questions. Sample interview questions are shown in Table 1.

1. How did you hear about and decide to come to the institute?
2. Tell me about your interest in nursing?
3. What are your thoughts about going to college?
4. What has influenced you to think about nursing (or another health career)?
5. What would affect your decision to go to, or not go to, college (nursing)?

*Table 1: Sample Interview Questions*

### Data Analysis

Transcribed interviews were read and re-read immediately after data collection, and after several months, to allow for formulation of ideas (Bogdan & Biklen, 1982). Narrative data was examined to discover themes related to the research questions. A theme is defined as a “patterned response or meaning within the data set” (Braun & Clark, 2006, p. 86). According to descriptive qualitative data analysis, responses were counted, not for statistical purposes, but to confirm patterns found in the initial analysis (Sandelowski, 2000). Although description is the least interpretive of qualitative methodologies, some interpretation was undertaken to understand meanings within the themes (Braun & Clark, 2006; Sandelowski, 2000). To reduce bias and provide rigor, a second qualitative researcher independently analyzed the data for themes in a similar manner (Polit & Beck, 2008). Themes were modified in an iterative process between the two researchers to reflect the most prevalent themes and patterns (Sandelowski, 2000; Sandelowski & Barroso, 2003).

Study rigor was judged using credibility, dependability, transferability, authenticity, and confirmability as described by Sandelowski (1986) and Lincoln and Guba (1985). Polit & Beck (2008) describe these components of rigor. Credibility is present when participants, other researchers, or other readers find the experiences described and subsequent explanations of the findings plausible. For this study, credibility was shown in several ways. Audiotaping and verbatim transcripts were used to obtain data for this study. Although it was not possible for students to review transcripts and findings, other Native American members of the program were involved through peer review by Native American program counselors (some of whom had been prior program attendees), the program director, and nurses to verify experiences and

meanings. Dependability refers to stability, or consistency of the data over time. In this study, audit trails of data collection and analysis met dependability criteria. Transferability occurs when findings are applicable to other contexts. Although this study took place in one particular setting with a purposive sample, vivid description of the meanings and perceptions of the participants ensured transferability. Authenticity is met when findings reflect the perceived meanings and experiences of participants. In this study, all student perspectives were included in data analysis to look for a wide range of realities. Finally, confirmability is present when findings reflect participant voices rather than preconceived ideas or biases of the researcher. An external Native American reviewer provided an inquiry audit of the data by questioning researcher bias. The researcher for this study was a White woman, a nurse faculty member at a college of nursing. It was important to include Native American peer reviewers to provide cultural perspectives. Researcher biases were noted and discussed with peer reviewers as well as with an external reviewer before, during, and after data collection and analysis. In this way, the voices of the participants were reflected and honored.

### Findings

The findings of this study showed that participants expected to attend college, and although interested in a health career, were uncertain if nursing was the career they wanted to pursue. In addition, the majority of participants reported facing significant obstacles related to their families. These obstacles included substance abuse, moving frequently, and changing guardianships. Such circumstances affected the students' ability to maintain their grades in school. Participants felt that support from family was the most important aspect for obtaining educational and career goals.

Twenty-one Native American high school students interested in nursing participated in the study. The mean age of the participants was 16.5 years (ranging from 15-18 years). Participants reported affiliation with nine different tribes. Table 2 shows the study demographics. The three research questions were: 1) What were students' perceptions about going to college; 2) What do students think about a career in nursing; and 3) What influences or barriers affect students' consideration for college and nursing?

The six themes that emerged were: 1) expecting to go to college, 2) helping others, 3) comparing nurses and doctors, 4) doubting, 5) overcoming obstacles, and 6) needing and wanting support. The first three themes were clearly related to the interview questions, while the last three emerged during the interviews and data analysis.

**Theme #1: Expecting to go to college.**

This theme addressed the research question: What are students' perceptions about going to college? The majority of participants expected to go to college and said their families expected them to get a bachelor's degree. Participants reported both influences from family, "they expect me to go", and self-motivation, "it will make me a better person", as reasons for going to college. Family influences were seen as more powerful

than self-motivation:

*A lot of it was for my parents. I think that sounds bad, because it's not for me, but it's for my parents. They always told me their mistakes. My mom got pregnant when she was 18 and I've seen them struggle so much throughout their lives. Like, we lived paycheck-to-paycheck and they wanted to be proud of me. So, when I got accepted to college it was so – I'm gonna cry now.*

Participants were rewarded for school success with ongoing encouragement to go to college as a way to a better life.

*I told my family and they were all happy for me because they want me to become something. They want me to do something. They don't want me to be like all the other people around the reservation, the drunks and everything.*

Despite expecting to go to college, participants foresaw difficulties leaving home. Participants expressed concern that they would not be able to attend college if a parent became ill, or if younger siblings needed care because of a parent with alcoholism. As one said: "My mom was partying all the time so I had to take care of all my little brothers and sisters because I'm older."

Not all participants reported expectations that they would go to college, or even finish high school, stating, "They expect me to drop out.

Male	3
Female	18
Year in school completed	
Freshman	8
Sophomore	5
Junior	5
Senior	3
Live on reservation	52%
Live off reservation	48%

Table 2: Study Demographics N=21

They expect me to fail". These students were motivated strictly by their own desire to attend college. This theme demonstrated that although these students expected to go to college there were varying levels of expectations among them.

#### Theme #2: Helping others.

This theme was related to the research question: What do students think about a career in nursing? Participants reported a desire to help others, including those in their tribe, and while nursing was seen as a way to accomplish this, it was not the only way. One participant considered how she could achieve that goal: "I want to help someone. A lawyer, you can go either way. Police, I'm like, no, people are afraid of police. Nursing is like a doctor, I will be able to help people heal".

Participants interested in nursing as a way to help others discussed wanting to become a nurse after caring for an ill family member: "The fact that during my whole life I'd take care of my grandma – I was always there taking care of her and watching her – it just made me want to help other people".

Several participants wanted to help others because of experiences with racism and lack of trust in the health care system. These incidents served as motivation to work in a health care career:

*I want to help people because I'm really scared of going into a doctor's office because I know they're going to be White. When I go to the health clinic they look at me really mean and they're thinking, "why don't you go to the Indian Health Service Clinic?"*

Participants also articulated health careers as fulfilling aspirations to help their tribe: "My family wants me to be a doctor or a lawyer. I told them I want to be a doctor so I can come back and help the tribe". The motivation to go to col-

lege and obtain a health career was centered on helping others, often expressed as helping "their people".

Helping others did not necessarily mean becoming a nurse and could be motivated from experiences with racism.

#### Theme #3: Comparing nurses and doctors.

This theme, like the second theme, was related to the research question: What do students think about a career in nursing? Participants were interested in nursing, but considered being a doctor or nurse as equally viable alternatives. Some believed that being a nurse was easier because nurses had less responsibility than doctors. Doctors were seen as powerful, giving orders, while nurses interacted with people and assisted them with their problems.

*I don't know, the doctors are kind of like the president of the United States. They're really, really important. All the little people, like the nurses, are the ones that actually get the job done, but it's the doctor that has the final word. I wouldn't want to be a doctor because I think it would be way too much responsibility. I don't think I could handle knowing that this person's life was actually in my hands. But as a nurse, they're in my hands, but it's not totally my re-sponsibility and so it would be kind of easier that way.*

Participants often reported a perception that nurses did more work than the doctors: "It sounds like the nurse does all the work and the doctor just says: here's your shot. Okay, you're done. Go home."

Participants reported that becoming a nurse would be easier than becoming a doctor, and saw a benefit in having less responsibility. However, they also thought nurses worked harder than doctors, suggesting that responsibility did not necessarily mean more work, rather more stress.

The third research question: What influences or barriers affect students' consideration of college and nursing? resulted in participants talking at length about family and home life difficulties. In addition, they described feeling doubt about their abilities and a need for support. Thus, the themes: Overcoming Obstacles, Doubting, and Needing and Wanting Support emerged from the data rather than from the research questions. These three themes further described the underlying problems these particular students faced.

#### Theme #4: Overcoming obstacles.

Patterns of psychological and physical abuse were commonly reported. Several participants had become surrogate parents to younger siblings, or other family members, when parents were immersed in addiction or legal problems. Others witnessed, or were victims of, various forms of abuse in their homes.

It started with verbal abuse and got physical after that. My mom would say, "I should have got an abortion" or "You're this, and you're that". I didn't want people to know how bad it was and I didn't want anything to happen to my little brothers so I took care of them and I played mommy for about three years.

Other participants discussed being removed by authorities and sent to foster care or to live with relatives. Some participants had found recovery and stability away from abusive and alcoholic family situations. One student who had left her mother to live with her aunt stated:

*I think it's going to be good for me getting out of that very bad environment. What bugged me the most is why my mom never wanted to grow up. She never discussed sex with us or brought us up to live in the world. It was so awesome because you could think of her as your best friend, but I thought, I need more than a best friend.*

Participants in this study were explicitly not asked about current or past substance abuse, but many volunteered such information:

*I was taken away from my mom two years ago, but I lived with my auntie, then I moved with my other auntie for a month after my breakdown. I moved back with my (other) auntie and I stayed there for almost a year, but I was into drinking. I got sent to this place that I was just supposed to try out for a month, or forty-five days. They just kept me there. Then after that they moved me to a foster home.*

Despite the trauma of abuse and either a parent or themselves attending rehab, participants missed their families. One participant described feeling free in her family and overregulated outside of it: "You feel so empty without them. Usually we're up forever just talking and laughing. Oh my God, we're so great together".

Another compared being away from her family to being locked in a cage:

*You're out in the wild and you're so free and then it's just like being caged up. You're like, "What's happening"? You're like a wild animal that's been put in the zoo. Then you've got all these rules and expectations.*

The ability to overcome obstacles was related time after time. Participants stopped drinking and were concerned about their progress and achievement in school. They worried about passing courses and keeping grades up.

*I didn't think I was going to make it because the way I was, I didn't think I was good enough to make it. The way I acted, I was getting in trouble all the time. I've been sober six months now and trying harder at school.*

Resisting the influence of friends and relatives was also reported: "One of my foster sisters took this five-liter box of wine and she's like, 'come on, take a drink,' but I don't want to ruin five months. I didn't do it".

Participants in this study reported facing significant obstacles in their daily lives making consideration of college, or even progress in high school a challenge. Substance abuse within families was one of the main obstacles.

#### Theme #5: Doubting.

Participants worried that they were “not good enough” for college or nursing, expressing concern about their ability to deal with problems or maintain behavior needed to be successful:

*I have problems with classes sometimes and I usually work them out, but if I don't, I get so far behind I can't understand what's going on anymore. I think that would be the only case that I would not want to continue to be a nurse, because I felt I couldn't handle anything.*

Financial difficulties created anxiety about getting into college among participants:

*I would like to go to the university, but I have a fear of not getting accepted, and then all I can do is pray, pray, pray for a whole bunch of scholarships because we definitely don't have money for it.*

Doubts about leaving home also emerged from the data: “I might end up having to go to college away from my family and I get homesick. Probably the maximum I could stay away would be three to four weeks”. As with overcoming obstacles, participants showed the same will to persevere and improve in school despite doubts. When a loss of interest went hand-in-hand with lower grades, one participant was pragmatically hopeful:

*I haven't been doing very good in school, but I've been planning on trying to pass all my classes. I am holding a 2.0 [grade point average], which is the highest in our school for Native Americans. The only reason it isn't higher is I just start losing interest and I stop doing my work. I have to just start it again.*

Doubt took many forms, but was seen to hinder consideration of higher education, much less a career in nursing. Rather than a physical or immediately emotional barrier, doubt came from reflection of their situations. Despite doubting, participants did not discount the possibility of going to college.

#### Theme #6: Needing and wanting support.

Some participants looked for and found help from school counselors and teachers, but stated they would like to have more support. The majority of participants said they received support from parents, or a parental figure, such as an aunt or grandmother:

*I never even really thought about college. I always told myself I didn't want to go to college. Then my aunt was telling me how fun it could be and how she could help me get into college.*

Wanting support could be a motivation to attend college. One participant observed her cousin benefiting from support:

*My cousin went to nursing school too, so like, all my aunts would call her to help her out. That's really cool. One of these days that will be me they're calling.*

Several participants attending schools off-reservation noted a lack of support, and racism at their schools, even from fellow Native American students:

*She [another Native American student] made fun of me because I'm part Mexican. I'm proud of each side. The way I show my pride for my Native side is doing Native things. But I also have Mexican in me and that's not going to leave me.*

Another described racism in sports:

*We have a lot of it because the town is a big racism town and they have teachers and coaches like that. My sister used to run and she had a starting position and then on her last couple of games she lost her starting po-*

*sition because she missed one practice. We have a cousin, who's Native American, but she's lighter colored and she missed two and nothing happened. Everybody else misses and nothing happens. So, the coach made my sister run a lot and she got really sick and lost hair because of stress and she got really sick and had to transfer schools.*

The participant recounted speaking to her vice principal about similar issues without any result. The need and desire for support from family, school personnel, and friends was prevalent among all the participants' reports. Some participants felt a great deal of support from family and friends while others did not. Racism was identified a problem that usually yielded insufficient support and that was usually left unresolved.

### **Limitations**

One limitation of this study was the timing of the interviews. With 21 participants and only one interviewer, interviews were conducted over the span of the program. This meant that some interview data could have been influenced by what participants were learning during the week-long program. However, one advantage of collecting data in this setting was the availability of participants. An attempt was made to identify possible biases related to when students had been interviewed.

### **Discussion**

A recent study of racial/ethnic groups and socioeconomic (SES) factors related to expectations of going to college found that Native American students had the lowest expectations of going to college, and that SES positively predicted such expectations (Mello, 2009). This study did not differentiate between ethnicity and SES, but discovered that most of the 21 high school student participants expected to go to col-

lege. They reported that their families also held this expectation with the exception of two, who stated that parents or school staff expected them to fail or drop out. Despite this, the students did not necessarily feel confident that they could succeed in college and in their subsequent career. A pervasive sense of doubt emerged as participants worried that grades, money, family obligations, or their ability to leave home would prevent them from going to college. Some feared that they would have to leave college if a family member became ill, or if they became overly homesick.

Participants faced significant obstacles in their home lives, and described being responsible for taking care of parents and younger siblings; being allowed to drink by their parents, and being encouraged to drink by their friends; and frequent moves related to alcoholism and abuse. The literature notes that supportive families with high expectations are predictors of college success (Demmert, 2001; Willeto, 1999). Yet, many participants in this study had high expectations without family support. One study discussed findings that confirm that ethnic minority first generation college students may rely more on self-motivation and peer support than family support for success, indicating that this study's participants could succeed despite the lack of family support (Dennis, Phinney, & Chuateco, 2005).

Recent work in the field of psychology demonstrates that minority students may have the ability to succeed academically, but consider the social costs too steep to do so. Social costs, measured through social acceptance, and academic success, measured by GPA, across ethnic groups showed that Native American and African American high school students experienced more loneliness, and less social support and sense of belonging, when they succeeded academically. Social costs were independent of

SES and number of other students of the same minority group at their schools (Fuller-Rowell, & Doan, 2010). Several participants in this study experienced racism and lack of support from peers, teachers, or family members. Although, the concept of social acceptance was not specifically identified, some of its factors were present.

Participants reported that they wanted to help people either through a health career or some other career such as police or lawyer. High school students of all ethnicities have reported a perception that doctors are more powerful than nurses and that they would choose nursing because it was easier than becoming a doctor (Degazon, & Shaw, 2007; Seago, Spetz, Keane, & Grumbach, 2006; Katz, 2005, 2007). The participants in this study held similar views. In addition, a culturally unique reason for going into health careers was to help their tribe. One participant wanted to help Native American people avoid the racism she had experienced in health clinics.

The literature confirms that Native American youth are at risk (Henson et al, 2002). Poverty and behavioral health disparities are evidenced by high suicide rates, violence, substance abuse, and traumatic loss exposure related to underfunded health systems and an ongoing history of oppression and discrimination (Goodkind et al, 2010). However, the participants in this study exhibited characteristics not encountered in the literature about minority or Native American students. Some participants had attended rehabilitation programs for substance abuse and some were enduring living arrangements they did not like because they did better in school. The results of this study demonstrate strengths and show that hope exists among these Native American high school students. For example, some who had been in treatment for alcohol abuse, or who had quit on their own, expressed

ambitions to finish high school and to go on to college. Students who reported doing poorly in school revealed an ambition to get back on their feet and improve their grades.

Future studies could include designing community based participatory research with high school students and community members to investigate factors, including cultural practices, that lead to success in college and careers. Such an investigation could lead to testable interventions that would increase graduation rates from bachelor's degree programs in nursing and possibly lead to community action to help families.

The value of this study's findings is that it confirms that despite being at risk, these students have strengths that can be capitalized to help them succeed at meeting their expectations and goals. Themes that emerged during the interviews demonstrated that although participants were dealing with traumatic incidents, they aspired toward achieving good grades, doing their homework, and getting into college. The findings of this study reinforce the need to address mental health disparities among Native American youth. Policy and practice changes are necessary to prepare students to increase the diversity of the workforce and to address health disparities (Parker, Haldane, Keltner, Strickland, & Tom-Orme, 2002). However, the results of this study suggest that mere academic intervention may not be enough. Community engagement is needed to help address the family related obstacles that hinder student success.

### **Implications for Practice and Research**

The researchers in this study were deeply moved by some of the difficult living conditions the participants described, along with their resolve to overcome them. However, without tremendous support from others, one wonders about their ability to succeed. Acknowledging and responding to student needs and concerns

before college could contribute to proper support systems to assist preparatory course work and career counseling, build an interest in nursing, assist with goal setting, support students in overcoming obstacles, and encourage progress in school. Therefore, recommendations from this study are aimed at practitioners, educators, and communities.

Community based strategies include involving parents, e.g., a study with Navajo students showed that family attitudes about education, especially from mothers, went hand-in-hand with youth education goals and successes (Willeto, 1999). Several studies support role models as key to Native American students' decisions to become nurses (Keltner et al., 2001; Plumbo, 1995; Yurkovich, 2001). Community elders and health care practitioners could mentor by providing adult support to promote success (Lessand, Fortin, Morcotte, Potvin, & Royer, 2009). Native American community leaders and members with cultural expertise should work with the youth to address behavioral disparities and lead efforts to improve educational opportunities. Partnerships between academic institutions, researchers, and communities are vital to repairing mistrust built on a history of exploitation (Duran, Oetzel, & Lucero, 2005).

Non-Native American educators and practitioners need to actively respond to student needs for support, including the need to go home for family matters more frequently than is often expected by non-Native students (Katz, 2005). Communities and university partnerships can address issues such as how students living on reservations may be hindered in making career decisions due to insufficient exposure to healthcare professionals, and family related emotional issues (Keltner, 1999; Martin, 1991). Using local camps such as a summer program provides students with Native American role models and mentors. Promoting classroom alter-

natives to bring cultural activities to students may provide support missing at home (Johnson, & Perkins, 2009). As this study indicates, more research and interventions geared toward student emotional needs, families, and academic preparation are needed to find effective strategies that address both mental health and educational needs of Native American youth, as well as greater involvement and partnerships between universities and communities.

Research has informed counselors, educators, institutions, and policy makers about barriers minority students face, and what to do about them (Orchard, Didham, Jong, & Fry, 2010). However, the story behind these studies remains largely hidden, especially in regard to Indigenous youth whose lives are often difficult, and whose people experience significant education and health disparities. This study attempted to gain a deeper understanding of what it was like for Native American high school students to consider going to college, and pursuing a health professions career. The purpose was to gain a deeper understanding of factors that could be addressed through interventions. The importance of this study is to increase knowledge about Indigenous students, who given the opportunity, may become future health professionals and leaders.

Finally, it is all but impossible for us to ignore the social justice and equity issues inherent in education, career, and health disparities. Being culturally competent is more than attending to differences of beliefs and traditions. Culture takes place within an active and changing environment that includes socioeconomic factors and policy which affect the availability of education and health care. Work is needed on many levels to change conditions that inhibit students from reaching their full potential and doing so involves full participation of community members who understand culture and who desire

change.

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