In addition to the experience of universal stressors associated with nursing school, culturally diverse nursing students experience unique stressors and challenges in the nursing education environment (Amaro, Abriam-Yago, & Yoder, 2006; Evans, 2004; Gilchrist & Rector, 2007; Soroff, Rich, Rubin, Strickland & Plotnik, 2002; Taxis, 2002; Veal, Bull, & Miller, 2012). The possibility exists that the experience of comfort, or being comfortable or comforted, could decrease perceptions of stress and may also assist culturally diverse students in managing stress. Comfort is described as freedom from pain, trouble or anxiety; something that consoles, gives freedom or ease (Merriam-Webster, 2006). Culturally diverse students may benefit from the promotion of comfort as they strive to cope with challenges associated with learning in a cultural environment different from their own. Nursing faculty should be educated to preserve and maintain comfort care needs which may impact retention of culturally diverse students. An ethnnonursing research study of the culture care meaning of comfort supports this understanding and consequently may improve the educational outcomes for culturally diverse nursing students.

Keywords
comfort, culture care theory, ethnnonursing research, nursing education, diverse nursing students
Background

Comfort

In her work with the middle range nursing theory, Comfort Theory, Kolcaba (1991, 1992, 1994, 2001, 2003) established a connection between nursing interventions and patient expressions of comfort. Kolcaba posited that comfort is individually defined and is contextually influenced; therefore, nursing interventions to maximize comfort must be individualized, as well. In order to assess comfort needs and subsequently intervene, nurses must first understand the meaning of comfort for the select population.

Malinowski and Stamler (2002) explored the concept of comfort in nursing and found no consensus for a definition of comfort in the literature. They connected ideas about comfort with Watson’s Theory of Caring (1988) and Leininger’s Culture Care Theory (1991). For example, caring actions may lead to the experience of comfort as uniquely defined by individuals. Malinowski and Stamler (2002) concluded that understanding the meaning of comfort is vital to the process of providing culturally congruent care and that research is needed to understand the meaning and expressions of comfort in order to facilitate comfort producing nursing actions in concert with cultural needs.

Comfort may have different meanings for students from diverse backgrounds. According to Leininger (2006a), “cultures have their own definitions and uses of their terms” (p. 12). Nurse educators’ understanding of the experience of comfort from a diverse perspective may be crucial to decreasing stress and improving chances of academic success for culturally diverse nursing students.

Diversity and Nursing Education

The need for increasing the diversity of the health care workforce to meet the needs of a diverse population is well established (American Association of College of Nursing, 2007; Sullivan, 2004). The initiative for increasing the proportion of minority registered nurses is hindered by the current nursing shortage and complicated by the lack of sufficient recruitment and retention of minority nursing students (Terhune, 2006). The obstacles to increasing diversity in the nursing student population are prominent in the literature. Ethnically diverse nursing students describe acts of discrimination and feelings of separation in the educational environment (Mills-Wisneski, 2005; Starr, 2009; Terhune, 2006; Terwijn, Pearce, Rogers-Clark, 2012). Additionally, nursing students express the lack of faculty understanding of their cultures and lack of support for their cultural needs as barriers to academic achievement (Alce-Planas, 2009; Amaro et al., 2006; Soroff et al., 2002; Starr, 2009; Taxis, 2002). Thus far, select recommendations to overcome these barriers include support for nursing faculty development in the area of culturally competent teaching (Amaro et al., 2006; Eschallier & Fullerton, 2009; Taxis, 2002; Yoder, 2001) and commitment to a culturally supportive and caring educational environment within the nursing curriculum (Amaro et al., 2006; Evans, 2004; Gilchrist & Rector, 2007; Rosenberg & O’Rourke, 2011).

Culture Care Theory

Culture, the central construct of Culture Care Theory (CCT), is defined as “the learned, shared and transmitted values, beliefs, norms, and lifeways of a particular culture that guides thinking, decisions, and actions in patterned ways” (Leininger, 1991, p. 47). A major tenet of CCT is to discover what is diverse among cultures and what is universal (Leininger 2006a). This is important because understanding similar and different expressions of culture guides the nurse in the provision of holistic care.

Caring and care are central constructs of Leininger’s CCT. According to Leininger (1991), caring is an action which is the essence of nursing and is directed towards assisting, supporting, or enabling another individual with culture care needs to improve a human condition. Leininger (2006a) posited that care, a phenom-
phenomenon to be understood in order to guide nursing actions, is “meaningful, explicit, and beneficial” (p. 3), is culturally rooted, and may be either abstract or concrete. Care can be “emic” or “etic” and ethnonursing research provides a compass for discovering both; emic care is defined as learned and transmitted, lay, indigenous, traditional or local knowledge and practices while etic care is formal and explicit cognitively learned professional care knowledge and practices (Leininger, 2006a). The study of culture care using Leininger’s theory has uncovered subtypes of care-related concepts and among them is comfort care. Comfort care has been identified as being “essential to healing and well-being” (Leininger, 2002, p. 57).

The discovery of emic and etic comfort care practices determine appropriate action and decision modes; these action modes guide culturally congruent and meaningful nursing care. The action and decision modes are: (a) culture care preservation and/or maintenance, (b) culture care accommodations and/or negotiation, and (c) culture care re-patterning and/or restructuring (Leininger, 2006a).

### Ethnonursing Research

#### Domain of Inquiry

Leininger’s (2007) ethnonursing research method enables the nurse researcher to “tease out the largely unknown and covert care beliefs, values and lifeways” (p.11) of particular cultures. Culturally diverse nursing students may have unique needs related to feeling uncomfortable in a dominant culture classroom. When comfort care needs are expressed by students in various words, behaviors, traditions, and habits, then enlightened faculty may assist by providing an educational environment to meet those needs. The domain of inquiry for this ethnonursing research is the study of the culture care meanings, experiences, and expressions of comfort for a culture of ethnically diverse pre-licensure baccalaureate nursing students in the educational setting.

#### Principles and Assumptions

Several principles guide ethnonursing research (Leininger, 2006a). The ethnonursing researcher must be an active listener who is genuinely engaged in the process of learning about the participants’ culture care meaning of a particular phenomenon, such as comfort. Additionally, the researcher must maintain an appreciative, inquisitive, and reflective position about what is heard, observed, and encountered when exploring cultural care meanings, followed by a commitment to record the data in a vigilant, meticulous, and unbiased manner in order to preserve the full expressions and meanings of the participants with attention paid to accurate interpretations (Leininger).

The theoretical assumptions that were adapted from CCT for this study are: (a) caring is essential to understanding the comfort needs of students; (b) CCT combines two major constructs (culture and care) that guide the researcher to understand and discover culturally derived meanings, expressions, patterns, and practices related to comfort; (c) differences exist in culture care meanings, expressions, and patterns between and among cultures; (d) culture care values, beliefs, and practices related to comfort are influenced by social structures and environmental factors; and (e) culturally congruent nursing education and nurse educator care occur when beliefs, expressions, and meanings of comfort are understood, which influences the type of action or decision mode that is appropriate for the culture care practices of comfort in the academic environment (derived from Leininger, 2006a, p. 18-19).

#### Participants and Setting

Participants for ethnonursing research are key informants who are members of the culture of interest and can speak to the specific norms, values and beliefs of the domain of inquiry and general informants who have universal knowledge of the culture and the domain of inquiry. (Leininger, 2006a). Key informants are needed
for in-depth study of the phenomenon and general informants are representative of the broader culture of interest. Seven, ethnically diverse, prelicensure nursing students, enrolled as juniors in a nursing program at a small mid-western college, were purposefully selected as key informants. All were female and single, three were first generation college students, and four described themselves as Black, one as Asian American, one as Latino/Lebanese, and one as Mediterranean. They ranged in age from 19 to 30 years.

General informants were interviewed after the researcher completed several sessions with the key informants. The general informants who were purposefully selected were members of the academic community and included faculty, academic advisors, administrators, advisors, members of the college diversity committee, and an ethnically diverse non-nursing student office worker. Of the 14 general informants, 2 were male, 12 were female, 3 were Latino, 4 were Black, and 7 were White. The general informants ranged in age from 23 to 57 years, and their level of education ranged from undergrad to doctorally prepared.

Ethnonursing research requires that the researcher’s “biases, prejudices, opinions, and pre-professional interpretations be withheld, suspended or controlled so that informants can present their emic ideas and interpretations rather than those of the researcher” (Leininger, 1991, p. 86). The researcher was involved in an ongoing process of reflection and self-assessment to remain vigilant in withholding bias with a personal journal serving as a vehicle to reflect on and suspend biases.

**Data Collection**

**Access.** The study was conducted on a non-residential campus of a private, faith-based mid-western college of 2,300 students. The researcher is not part of a particular racial minority group and utilized the Stranger to Trusted Friend Enabler (Leininger, 2006b) and the Observations- Participation-Reflection Enabler (OPR) to assist in gaining access and gathering data that was sincere and trustworthy from the informants (Leininger, 2006b). Leininger (2006b) developed The Stranger to Trusted Friend Enabler to facilitate the collection of credible authentic responses. The researcher entered the academic student world of the informants with respect and sensitivity to their experiences in a dominant culture. The freely shared emic values, beliefs, and practices about comfort indicated that the informants trusted and accepted the researcher.

Leininger (2006b) developed the OPR Enabler to provide a means for the researcher to become involved with the informants, to stay connected with them, and to bring the ethnonursing research to a close. The researcher was initially an observer at student nurse association meetings and in a nursing classroom and then a participant in classroom group activities which provided interaction between the researcher and the students prior to soliciting volunteers for the individual interviews. The reflection phase of the OPR occurred when the researcher reflected on phenomenon observed and the expressions heard before interpreting the meanings. Furthermore, reflection occurred at the conclusion of the study when the findings were confirmed by the key informants.

The Sunrise Model (Leininger, 1991), later redefined as Sunrise Enabler to Discover Culture Care (Leininger, 2006a), is a guide that depicts multiple factors influencing culture care expression, patterns, and practices. The factors include: technological, religious and philosophical, kinship and social, cultural beliefs and life ways, political and legal, economic and educational. The Sunrise Enabler guided the researcher in focusing on the expansive holistic view of the culture care meaning of comfort throughout the process of data collection and analysis with particular emphasis on cultural values and life way factors, kinship and social factors, and educational factors.
Sources of data. The use of the Enablers occurred simultaneously throughout the process of data collection and analysis. The researcher conducted one-on-one in-depth, semi-structured interviews in private offices and conference rooms on campus at a day and time convenient for informants. All the participants signed a consent form and selected a pseudonym in lieu of their names for the data collection, data analysis and results. The researcher obtained approval from the Institutional Review Board (IRB) of the researcher’s university of study and of the participants’ college. Key informants were given a nominal gift certificate for ten dollars to the college café in appreciation of their time.

An interview tool was formulated and used to allow an in-depth exploration of the cultural meanings, expressions, and practices related to comfort (see Table 1). Interviews were audio-taped and lasted approximately one hour. Seven key informants were interviewed once, and five were interviewed a second time for confirmation of meanings, interpretations and expressions about comfort. As data from the key informants were recorded and analyzed, the general informants were interviewed for perspectives, interpretations, and descriptions of the broader community or, as in this case, the culture of the college environment. Informant verbal and non-verbal responses were documented in a field journal. Finally, the last source of data was the use of artifacts. Artifacts assist the researcher in understanding the contextual meaning of the culture care phenomenon from a symbolic perspective (Leininger, 2006b). Key informants were asked to bring an object or artifact from their culture that represented comfort. Each artifact was photographed and described in the researcher’s field notes using the participant’s words to express how the artifact symbolized comfort.

Data Analysis
In qualitative research, the processes of data collection and data analysis occur simultaneously. Leininger recommends six qualitative crite-

<table>
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<tr>
<th>Q1</th>
<th>As an ethnically diverse nursing student what does comfort or feeling comfortable mean to you?</th>
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<tr>
<td>Q2</td>
<td>As an ethnically diverse nursing student what does feeling uncomfortable mean to you?</td>
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<td>Q3</td>
<td>What is your experience of comfort in the nursing classroom?</td>
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<td>Q4</td>
<td>What is your experience of discomfort in the nursing classroom?</td>
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<td>Q5</td>
<td>What do you need to feel comfortable in the classroom and nursing skills lab?</td>
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<td>Q6</td>
<td>How do you make yourself feel comfortable in an educational setting?</td>
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<td>Q7</td>
<td>How do other students help to make you feel comfortable or uncomfortable in the educational setting?</td>
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<td>Q8</td>
<td>What things do faculty do that make you feel more or less comfortable in the educational setting?</td>
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<td>Q9</td>
<td>What does it mean to be cared for or to feel comfort care in the classroom?</td>
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<td>Q10</td>
<td>In what ways do you think comfort can be offered in the educational setting for diverse nursing students?</td>
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<td>Q11</td>
<td>What are your practices or activities related to comfort?</td>
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<td>Q12</td>
<td>What accommodations by faculty would maximize comfort for you in the educational setting?</td>
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<td>Q13</td>
<td>How do you make yourself feel comfortable when you are not at school?</td>
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<td>Q14</td>
<td>What do you do if you feel uncomfortable when you are not at school?</td>
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<td>Q15</td>
<td>How do your friends and family members make themselves feel comfortable?</td>
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<td>Q16</td>
<td>How do your friends and family members make you feel comfortable?</td>
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<td>Q17</td>
<td>How has your educational experience influenced the way you feel comfort or discomfort?</td>
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ria for the substantiation of qualitative findings. The criteria used to ensure the trustworthiness of the research were: Credibility, Confirmability, Meaning-in-Context, Recurrent Patterning, Saturation, and Transferability (Leininger, 2006b).

The data from each interview were read and compared with the data from previous interviews using a constant comparative analysis approach (Creswell, 2007). The interview data were compared to the data from the observational logs and from the artifact notes. Data analysis occurred in the four phases of Ethnonursing Qualitative Data Analysis that sometimes overlap due to the constant comparative analysis to search for patterns, similarities, and differences (Leininger, 2006b). In the first phase of data collection, data from the audio-tapes as well as observations and descriptions of artifacts from the field journal were transcribed verbatim into a word processing document. The second phase was identification and categorization of 31 descriptors and components. In this phase, the researcher utilized the qualitative software data program Atlas ti (Atlas. ti, 2009) to assist with coding the large volume of data. Etic and emic data were analyzed for differences and similarities. The third phase of data analysis involved pattern and contextual analysis. In this phase, the researcher looked for saturation of data and for recurrent patterns of differences and similarities of meanings and expressions for the culture care meaning of comfort. The last phase required “the highest degree of analysis, synthesis and interpretation” (Leininger, 2006b, p. 62) and comprised major themes, research findings, theoretical formulations, and recommendations. In this final phase, five themes supported by 16 recurrent patterns became apparent. The researcher rechecked the themes and patterns to assure congruence with the raw data, and key and general informants confirmed.

**Overview of Resulting Themes**

Five themes supported by recurrent patterns reflect the synthesis of key and general informants’ expressions of comfort care (see Table 2). The five themes are (a) the desire to be cared for as a distinct human being within the context of ethnic differences; (b) being ethnically diverse influences expressions of comfort; (c) identification with cultural practices and values promotes feelings of comfort, as well as discomfort; (d) family, social, and peer relationships effect expressions of comfort care; and (e) comfort care activities of ethnically diverse nursing students are represented by universal and diverse expressions.

**Theme One**

The first comfort theme was expressed as the desire to be cared for as a distinct human being within the context of ethnic differences. This theme broadly pertains to the overall academic atmosphere. Diverse nursing students want college personnel to recognize their struggles and to extend themselves by offering support. Five care patterns support the first theme. The first care pattern, cared for beyond the student role, was evident in the key informants’ descriptions of interactions with academic personnel. Support tendered in a caring, concerned manner made the difference in the students’ overall feelings of comfort within the college campus environment. The pattern was reflected in key informant comments such as “she [the advisor] introduced herself to me and she’s like if you ever need to talk”; in another comment, “When an instructor knows your name that makes you comfortable ‘cause they remember it, there’s meaning behind the name, there’s a relationship there.” In particular, first generation college students appreciated the staff and faculty who connected them to college programs and offered them assistance in navigating through the world of academia.

The second care pattern, cultural approach to course content, was a comfort need expressed by diverse students who value culture being integrated into the milieu of the college
environment, in both the classroom and on campus. Diverse nursing students appreciated examples and references to their traditions and customs as applied to nursing concepts and content taught in class. Informants shared their views by commenting: “when you do come to that topic [diversity] opening up so that everybody has a chance to speak on that,” or “you want those [diverse] examples and those [instructors] who are able to talk from different places...for me personally I want to hear professors say things that I can relate to.”

The next pattern, judged or singled out by faculty, was identified by informants as a cause of discomfort. The key informants shared perceptions of non-caring behavior toward their ethnic diversity. Specific stories included being embarrassed in front of peers for asking questions and lack of understanding about the student’s cultural background. Comments by key informants that support this pattern of discomfort or non-caring include, “discomfort is if I have to be anything other than myself,” or “if I have to feel like I have to be a certain way to be accepted.” These key informants perceived that less is expected of them academically because they are diverse which is reflected in the comment “you aren’t expected to be able to perform as everyone else.”

The fourth pattern is faculty care, support, respect and responsiveness. Key informants indicated that specific actions in the classroom influenced feelings of comfort. Comfort with faculty was connected to the students’ willingness to continue down the challenging academic path of nursing education. Students affirm that they

<table>
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<th>Themes</th>
<th>Patterns</th>
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<td>The desire to be cared for as a distinct human being within the context of ethnic differences</td>
<td>Cared for beyond the student role</td>
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<td>Cultural approach to course content</td>
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<td>Judged or singled out by faculty</td>
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<td>Faculty care, support, respect, responsiveness</td>
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<td>Making connections to navigate college</td>
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<td>Being ethnically diverse influences expressions of comfort</td>
<td>Need for acceptance and recognition</td>
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<td>Withholding feelings and expressions</td>
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<td>Self-preparation beyond expectations</td>
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<tr>
<td>Identification with cultural practices and values promotes feelings of comfort, as well as discomfort</td>
<td>Cultural connections</td>
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<td>Racial stereotyping</td>
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<td>Family, social, and peer relationships effect expressions of comfort care</td>
<td>Peer care and support</td>
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<td>Maintaining family obligations</td>
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<td>Lack of supportive friends and family creates disconnection</td>
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<td>Comfort care activities of ethnically diverse nursing students are represented by universal and diverse expressions</td>
<td>Expression of physical comfort</td>
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<td>Food in the presence of family</td>
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<td>Self comfort measures</td>
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Table 2.
are more likely to engage in their classroom learning when faculty call them by name, ask if assistance is needed, and are enthusiastic about their roles as educators. A key informant explained how approachability affects comfort and described the following about one of her faculty members: “She would show me how to be organized with school life and personal life. I know that is a lot from a teacher, but when I started the nursing program I had no idea what to expect.” Informants indicated that faculty who were perceived to be less than approachable hindered the educational experience. Comments that reflect this sentiment were: “If you don’t have support, no one’s made an effort, then what’s the point of me staying,” or “she [the teacher] is not gonna go beyond what she is required to do and so that kind of makes you feel like she’s not approachable.” One general informant remarked that if the faculty member approaches the student to find out what is hindering the student from understanding class material, it gives that student an opportunity to elaborate. The general informant further stated, “when you develop that kind of open dialogue with that student, the student knows that you care about the struggles that they’re having and you know that they’re trying and they want to do well.”

The fifth and final pattern that supports the theme is making connections to navigate college. Informants identified the importance of making connections to those programs and activities during the academic journey that facilitate comfort within the educational environment. Nicole, a key informant, reflects:

I need to know how to make it through the program, you know, how to be able to organize work and just referring me to other people that are around school to help you… that helped a lot–just giving me other information besides just handing out the syllabus.

General informants who were in positions to assist students beyond the academic role stated that helping students to make connections to overcome obstacles such as transportation, childcare, and finances is especially important for first generation college students. A general informant discussed the discomfort of first generation diverse students who are “stepping out on a limb because they have no blueprint to follow.” The informant stated that providing “a landscape to follow” is beneficial and that “just being supportive does wonders for the human psyche, just feeling that you have someone here to say, hey, I am here for you, I care about you as a person and you can do this.”

**Theme Two**

Theme two is being ethnically diverse influences expressions of comfort. Informants recognized that ethnic diversity plays a significant role in how they experience comfort and seek comfort in the classroom. Three patterns support this theme.

The first pattern is the need for acceptance and recognition. When asked to describe comfort in the classroom from the perspective of being ethnically diverse, informants overwhelming expressed comfort as being accepted for who they are. The phrases and words used to illustrate acceptance included “being myself,” “being able to speak up,” “I want to be treated like everyone else is treated,” and “be yourself without fear or reproach.” Informants want this acceptance and recognition from the students in their class, as well as from the faculty. The descriptions of what comfort feels like in the classroom stem from understanding feelings of discomfort. Informants described discomfort in the classroom as being neglected, with phrases such as “no eye contact,” “feels like you’re not included,” or “set apart.”

Both key and general informants discussed the tendency of diverse students to inhibit their responses and hold back their participation in the classroom due to fear of failure or of being misunderstood, hence the pattern withholding feelings and expressions. This pattern is influ-
enced by past experiences in the classroom as an ethnically diverse person and is reflected in comments such as, “I am not sure who to approach for help [in the nursing lab] and I may look for that one person who helps all the time but if she’s not there then I usually won’t ask.” An informant described feelings that carried over from being the only Black person in the eighth grade: “instead of putting yourself out there you just say hi and keep going.” Students experience risk in the silence. As one general informant, Elena stated, “if they [diverse students] feel isolated and all alone that’s when I see them fizzle out and end up leaving.”

The third pattern for this theme is self preparation beyond expectations. All the ethnically diverse informants cited the pressure to over-achieve as a significant detractor from their comfort level because, from their perspective, society expects less of them. This pressure induces them to seek comfort in their own personal preparedness. This preparedness is exhibited by being mentally prepared, having a positive attitude, arriving to class early, making the best of the educational opportunity, and “going the extra mile”. When asked for further explanation, one key informant, Anita, said, “I feel like I have to fight even harder, like not even academ-ic wise, just mentally, mentally and emotional-ly like, I feel like I have to be suited up per se, like ready to be able to go in [the classroom] and deal with that.”

Theme Three

The third theme is identification with cultural practices and values promotes feelings of comfort as well as discomfort. Two contrasting patterns support this theme: cultural connections and racial stereotyping.

For the first care pattern, cultural connections, key informants spoke about cultural practices. The cultural values, beliefs and lifeways represented diversities and universalities (Leininger, 2006a) among the informants. Selected examples include: male vs. female roles, having a cur-few as an adult single woman, expectations of parents and grandparents, the role of food, and the importance of family gatherings. According to key informant Mary, males in her Middle Eastern culture, including her grandfather and father, traditionally are not involved with activities related to childcare, such as bathing children or changing diapers, and are traditionally the sole income providers. However, Mary is supported by her entire family to obtain an education and have a career. She stated “because of the things that my family does, it connects me to that culture.” Mary’s comfort artifact is a circle of blue prayer beads from the Middle East given to her by her grandfather. The beads provide her with strength to persevere and knowledge that she is connected to a higher power.

Informants recognized their need to have someone in the educational environment with whom to make cultural connections with. They spoke of having someone who “looked like them” to make those connections; however, at present the study college does not have a significant number of diverse persons in academic positions. Consequently, the general informants who are ethnically diverse share personal cultural practices in order to connect with students. One general informant states, “The more I share about myself and my personal struggles…I see my Hispanic students kind of a little more because they know I know what they’re going through.”

The next pattern which caused feelings of discomfort for these diverse nursing students was racial stereotyping. The informants described instances of being labeled, treated inappropriately, or being the recipient of stero-typical judgment because of being identified with a specific culture. Informants pointed out that this behavior was most likely due to lack of exposure to people who are ethnically diverse. One key informant said about faculty, “having to work with ethnically diverse students I think some people who maybe have never been exposed to ethnically diverse people judge them
Based on stereotype.” Another key informant presented an example of a White nursing student inaccurately describing dark skin. A Black key informant talked about instructors who refer to the inner city in “a negative way.” The informant elaborated that, yes, while there may be some violence in the city there are still some “positive things that happen there, too.” One general informant stated that a comfortable educational environment would be one where diverse students “feel psychologically safe”. Until the students feel safe, they put up a barrier because they are afraid of the misconceptions about their ethnicity. One key informant, who presented her Bible as her comfort artifact, stated, “It’s a comfort in knowing there’s a God who does not see color.”

**Theme Four**

The fourth theme, *family, social, and peer relationships effect expressions of comfort care*, exposed the impact that relationships have on the well-being of ethnically diverse students. This theme is reinforced by three patterns.

The first pattern was *peer care and support*. For this pattern, peers were designated by the key informants as nursing student classmates regardless of ethnicity. Ethnically diverse nursing students valued their developing relationships with specific classmates and members of their clinical groups. One key informant explained, “nursing school has been that much more enhanced by having these students with me and I bet they would say the same thing.” Peers may transcend racial boundaries, and three key informants explained that the peer relationships have strengthened the understanding of similarities rather than differences between peers.

The second pattern was *maintaining family obligations*. Informants expressed that cultural obligations include relationships with families. For some informants, family relationships are a source of comfort and strength from which students draw upon during times of stress. One key informant, Janice, presented a silver neck-

lace with her initial that was given to her by her parents as her comfort artifact. The necklace has the word “believe” inscribed on it. She stated, “It basically gives me strength that if I wear it – it reminds me that everything is possible if I believe in myself.”

Informants described cultural obligations that are universal, as well as diverse. Several key informants talked about how being at home with their families was comforting. Two key informants explained that, with the exception of school, all the activities of their lives take place within a several mile radius of their homes. Rudy, a key informant, remarked, “We [family] encourage each other...lift each other up.” Three key informants, who do not live with their parents, described the importance of talking to a family member, usually a mother or sister, on a regular basis. Key informants with children explained that a source of comfort was knowing that family members care for their children while the informants are in school. Key informants appreciated family members who recognized the students’ difficulties balancing home and school.

The third pattern, *lack of supportive friends and family creates disconnection*, described the challenges within social relationships that some diverse nursing students experience. Not all key informants had the supportive relationships that were described in the second pattern. Several key informants feel discomfort within their own culture about going to college. Both key and general informants discussed the struggles associated with the lack of understanding within specific cultures about the pursuit of an education. A general informant, stated, “family determines a lot. If everyone in the family does not see the purpose of what you’re doing that’s enough to deter students from not doing it [going to college].” An additional example from a general informant provided understanding about this attitude; if your family members have been working successfully on the same
factory line for several generations, then why would it be necessary to go to college? One key informant, Linette, stated that the friends that she used to “hang with” did not have any goals and could not understand why she continued on to college, so she ended the friendships. Another key informant ended friendships because her friends used drugs and alcohol. Ethnically diverse general informants stated this is where faculty can impact students’ comfort by recognizing and appreciating the sacrifices that students are making in order to attend college.

Theme Five

The fifth theme is comfort care activities of ethnically diverse nursing students are represented by universal and diverse expressions. General comfort care activities appear to be influenced by the physical environment and by the comfort practices of family and friends. Three patterns sustain this culture care theme.

The first pattern is expressions of physical comfort related to the physical classroom. Key informants reported a preference for small class sizes. One informant remarked that she does not like to sit “shoulder to shoulder with other students.” One key informant prefers sitting towards the back of the classroom because she does not like the feeling that her classmates are staring at the back of her head. Another key informant stated that if she does not sit at the front of the classroom, then she feels disconnected from the instructor. The researcher noted that the students sat in the same seats for every class and the ethnically diverse students did not sit together as a general rule.

The second care pattern was family connections around food. Six key informants and three general informants spoke about food in the presence of family as a course of comfort. Even the key informants who had challenging family relationships expressed comfort with family food gatherings. One Latino general information spoke of food as nurturing in her culture. The statement from a key information “we had to unite around this meal and talk” support this pattern.

The third care pattern was self comfort activities and expressions. Key informants participated in varied comfort activities such as listening to music, shopping, venting feelings, talking with friends and/or family members, being in the presence of family members, spending time with children, praying, going to the movies, and going out to a restaurant to eat. Key informants described limited free time due to the demands of nursing school, and, if they have additional job and family duties, time for comfort activities is limited. When they do have time for supportive family members and friends, they feel relaxed and free of the burdens that may cause them discomfort in the educational setting.

Modes of Decision Action

Cultural understanding between the faculty and students may facilitate an atmosphere of caring and appreciation for the diversity that exists in the classroom. The emic expressions of comfort for ethnically diverse nursing students in the educational setting are associated with care patterns that are both universal and diverse. The nurse educator may demonstrate comfort care through the adaptation of three modes of decision-making and action in relation to the themes.

Culture Care Preservation or Maintenance

The first mode, culture care preservation or maintenance, refers to those actions which preserve existing culture care beliefs (Leininger, 2006a). This mode reflects the nurse educator’s opportunity to continue the cultural comfort care expressions of the diverse nursing student in the academic environment. Activities for preserving comfort care patterns include calling students by name and recognizing them as distinct human beings. Comfort care expression of recognition and acceptance may be preserved by inquiring about family members and asking...
about specific family practices and traditions

Faculty who are deemed approachable were a source of comfort for diverse students. Additionally, if faculty were not diverse, then faculty presenting an open, caring, genuine attitude was crucial to students feeling comfortable and interacting with faculty. Leininger (2008) explains that when trust is established, both the faculty and the students feel comfortable to exchange personal and life experiences that have formed their opinions of the world. Bednarz, Schim, and Doorenbos (2010) suggested that faculty should appreciate differences and use the knowledge of these differences to enhance learning opportunities for both faculty and students. Faculty appreciation of differences commences with self-assessment of breadth and depth of knowledge about cultural diversity.

Students expressed comfort with the faculty and staff who took the time to uncover what was needed to enhance success in the college setting. Faculty should encourage the use of college services such as multicultural centers, programs for first generation college students, and academic support programs that are in place to assist diverse students with navigating the academic journey. Museus and Quaye (2009) proposed that students whose cultural backgrounds are endorsed by their contacts with cultural agents (cultural agents refer to academic or social groups with whom the students can connect) are associated with persistence through the college.

Culture Care Accommodation and Negotiation

In this mode the nurse educator accommodates the comfort care needs of the diverse nursing student while considering the nursing course/curriculum requirements and clinical obligations. Students desire a curriculum that celebrates their diversity, and nurse educators should incorporate a variety of cultural content throughout a nursing program. Escallier and Fullerton (2009) suggested that the use of a cultural competency philosophy threaded throughout the nursing curriculum promotes a sense of belonging for students who are ethnically diverse. This philosophy means presenting a curriculum which provides examples of culturally congruent nursing care for diverse populations. Faculty may ask students for their input about caring for patients in the context of their specific culture which assists the students in applying nursing knowledge from their perspective relative to their life experiences. This interaction is an opportunity to learn about emic care from the perspective of the students’ culture.

Students expressed discomfort with balancing multiple roles relating to family, work, home, and school. Expectations of family members and demands at home may interfere with classroom deadlines and attendance. Diverse students who are reluctant to speak up to faculty about home and family challenges risk being misunderstood by saying nothing. Faculty members may make an effort to ask students what obstacles they are facing that interfere with academic success. Although certain course expectations may be non-negotiable, faculty can assist diverse nursing students who are facing barriers with problem-solving and may provide resources for support.

Faculty can support students’ needs for positive interactions and social connections. Students expressed comfort in the healthy relationships they had with family, peers, and faculty. Faculty can assist students by accommodating supportive connections in several ways: a) assisting diverse students to find others on campus who share their diversity; b) assigning students to small groups in which they feel comfortable; c) understanding that for some individuals comfort means socializing with members of their own race (Smith, Bowman, & Hsu, 2007); and d) committing to the success of all students regardless of the faculty’s and or student’s ethnicity.
Culture Care Re-patterning and Restructuring

This mode refers to those professional actions that can assist members of a culture towards change to achieve better outcomes (Leininger, 2006a). An area where re-patterning can occur is the comfort care pattern of diverse students withholding expressions and feelings. Students report they feel a lack of acceptance of their answers in class or in small group situations or fear being wrong in front of peers. General informants recommend that faculty acknowledge diverse students and ask for their input and perspective during class time. If necessary, faculty can engage students one-on-one to determine the individual level of comfort with speaking and participating in class to discover what aspects of culture students feel at ease with sharing.

Another area that requires re-patterning is the students’ expression of discomfort due to feelings of discrimination and racial stereotyping. Faculty can role model cultural competency for all students. This includes challenging bias, incorrect information, and stereotypical responses from students, and other faculty members. Faculty in the classroom should be comfortable to have their opinions and views respectfully tested and questioned by diverse students. Leininger (2008) advocates for this open interaction between students and faculty because it promotes learning and respect. “Faculty and students need to feel free to debate, question, or refute ideas that may be vague or limitedly studied” (Leininger, 2008, p. 14). Wong et al. (2008) suggested that all college students, independent of their race, gain from interactions with diverse students and educators.

While much of the responsibility for the modes of decision and action fall within the realm of the faculty role, institutions of higher learning also bear responsibility for comfort care as it relates to the retention of diverse nursing students. This responsibility includes creating an educational milieu that celebrates diversity in students, faculty, and staff and implies a high degree of commitment from the institution’s administrative leadership. Strategies may include raising awareness of attitudes about diversity, engaging in meaningful dialogue, providing funding for faculty and staff education about cultural competence, and supporting campus initiatives that support diversity.

Recommendations for Further Research

Limitations to this study included the specific setting of a small college campus with a lack of diverse nursing faculty. Experiences of comfort may be different for ethnically diverse nursing students who have ethnically diverse faculty, role models, and other ethnically diverse students in their educational setting. Also, the distinctive mix of diversity in the small sample contributes to the uniqueness of the students’ responses; therefore, it would be inappropriate to assume complete transferability of the findings. This study examined comfort for junior level nursing students. Research examining perceptions of comfort for first or second year diverse students who have not yet been accepted into the nursing program would further contribute to the understanding of the culture care meaning of comfort.

Conclusion

Students who are ethnically diverse face challenges unique to learning in an educational setting within a dominant culture. This study exemplifies the culturally defined expressions of comfort for ethnically diverse nursing students in the academic setting. Patterns of comfort care are expressed similarly and differently, depending on the students’ precollege cultural factors. Nurse educators may take a culturally congruent approach by applying the action and decision modes relative to preserving, accommodating, and restructuring culture care patterns to enhance comfort for ethnically diverse nursing students. Enhancing comfort in the educational setting as it is culturally defined may
Contribute to retention of ethnically diverse nursing students, who will ultimately practice nursing care for a culturally diverse population of patients.

**References**


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