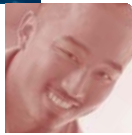


The EMFP Fellows



This section of the report presents an overview of the personal and professional characteristics of the participants in the Program. It includes information about important variables such as the Fellows' ethnic/minority background, grade point averages, marital status, publication productivity, and other important characteristics.

Personal Characteristics of Research and Clinical Fellows

Racial and Ethnic Background

Comparisons of the ethnic/minority backgrounds of 266 Fellows from 1975 to 2000 indicate that the Program has been able to award funding to nurses across the diversity of ethnic/minority groups. All of these 266 Fellows had career goals of providing services to, or conducting research, about underserved and unserved ethnic/minority groups. Since different groups have various needs and a range of avenues of access for health service delivery, it is important that the total pool of mental health professionals embrace a range of interests and backgrounds.

The largest percentages of applicants to the EMFP were African American (70%), followed by Hispanics (15%) and Asian Americans (10%). Since the first cohort of Fellows (1975), nurses of Hispanic and American Indian descent have remained the most underrepresented groups of nurses when compared with their own percentages in the total population; see Figure 10.

In Figures 10 through 17, and Tables 4 and 5, the term Others refers to a group of ethnic/minority Fellows who identified themselves as Hawaiian, Gaumaniens, Pacific Islanders, and Marshall Islanders. These data will help the EMFP's National Advisory Committee and staff members to better understand how to focus on recruitment and outreach efforts. Based on this information, staff will consider developing specific materials for recruitment. As an example, brochures and fact sheets could be developed for American Indian/Alaska Natives and widely distributed throughout the United States. The intent of this approach is to attract the attention of young men and women, and interest them in a career in psychiatric and mental health nursing. Once they are identified, additional support systems could be developed to guide and direct them into doctoral programs in psychiatric care. Recruitment materials would be strategically placed on reservations and in Native American and Alaska Natives communities. Along with this effort would be activities designed to strengthen relationships between and among EMFP staff, advisory members, NANAINA members, and numerous other stakeholders. This approach, like other initiatives, is conceptualized as long-term and enduring.



Applicants & Fellows: Ethnic/Minority Groups

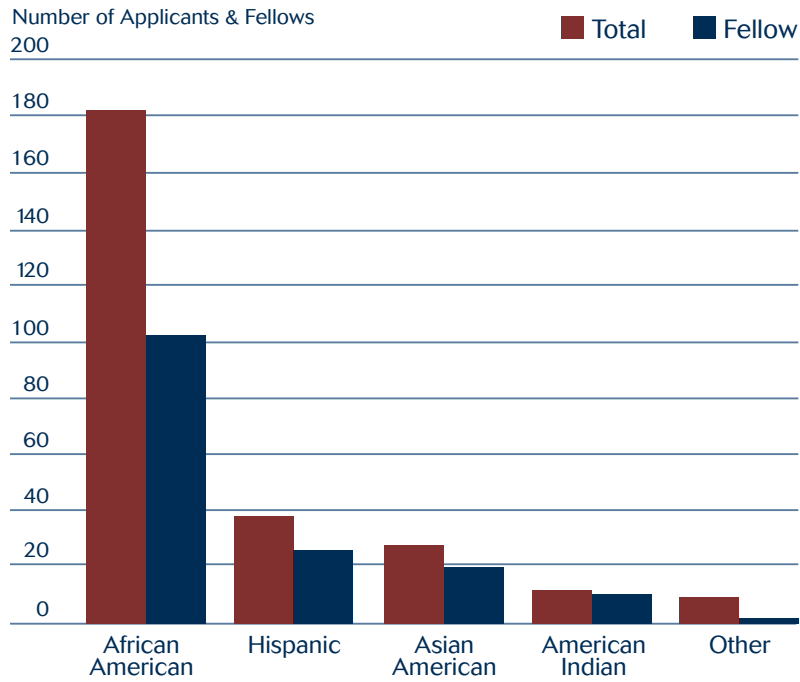


Figure 10.

Percent of Fellows for each Ethnic/Minority Group Applicants

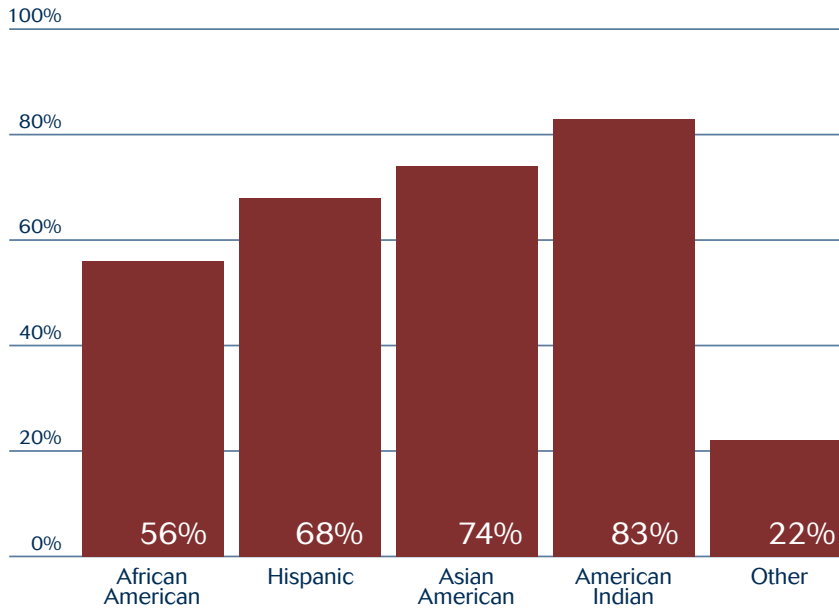


Figure 11.

In Figure 11, the percentage of Fellows in each ethnic/minority group is revealed. As the figure indicates, the highest percentage of accepted applications occurred among American Indians, followed by Asian Americans, Hispanic Americans and finally African Americans. The Other category had the lowest Fellow to applicant ratio. These data indicate that if an American Indian/Alaska Native nurse applied to the Fellowship program, their likelihood of being accepted was quite high, at 83%.

Table 4.
Summary Measures of Age of Applicants at the Time of Admittance to the EMFP

Ethnicity/Minority	N	Mean	Standard Deviation	Minimum	Maximum
African American	126	37.44	6.98	20	52
Hispanic American	27	37.74	6.47	21	49
Asian American	16	37.25	9.25	21	54
American Indian	10	39.25	7.29	30	54
Other	9	39.44	8.38	30	54

At the time of application to the EMFP, the Fellows' mean age ranged from 39.44 (Other) to 37.44 (African American). It is evident from these data that most of the nurses were in a similar age category at the time that they decided to pursue the doctorate degree. Hispanic and Asian Americans shared very close mean ages, at 37.74 and 37.25 respectively. African Americans followed closely with a mean age of 37.44.

Marital Status

Of the 266 Fellows, the largest numbers (n=100) were married, and a small number indicated that they were never married (n=58). The comparison of Fellows with those not awarded fellowships indicates that there was no difference in marital status. The findings suggest that the majority of Fellows began their doctoral programs with family responsibilities. Moreover, financial support was critical for the women, especially those with families, who would forego employment to pursue additional educational opportunities. Moreover, financial support was vital because this targeted population of nurses were more likely to be from lower socio-economic backgrounds with limited material and human support systems upon which to rely (See Table 1).

Figure 12 indicates that more African American women were single than married. Unlike the African American women, among the other ethnic/minority Fellows (American Indian, Asian American, and Hispanic) a higher percentage of the Fellows were married. In the Other category, the numbers of married and single Fellows were about the same.

Region of Country

An estimated 63% of the African American Fellows were from the South, and about 33% of the African American Fellows were from the combined regions of the North and East. However, because the total number of African Americans is almost 10 times larger than the Fellows in the other groups, these findings should be read with caution. Moreover, in this category, there were large amounts of missing data.

These data suggest that the largest concentration of African American Fellows live in the South (63%), with the second largest concentration residing in the North (22.8%), closely followed by the East (20.8%), with a smaller population living in the West (8.9%). Similarly, American Indian Fellows typically live in the South (50.0%), with a rather sizeable population in the North (33.3%), and a smaller number (16.7%) living in the East. Hispanic Fellows are more likely to live in the South (38.5%), but the West is also home to a substantial population (26.9%), with a smaller number of Fellows residing in the East (15.4%). The Other category has Fellows who live in the North (66.7%), and the South (33.3%).

Grade Point Average Among Fellows

Fellows, once enrolled in doctoral programs maintained, on a four-point scale, high grade point averages across all grading periods. Asian American nurses had the highest average (3.81), with those nurses listed in the Other group reporting the next highest average (3.70). African American nurses ranked third (3.60), followed by Hispanic Americans (3.57), and then American Indians (3.20).

Table 5.
Summary Measures of Grade Point Average (GPA) of Fellows Across

All Grading Periods

Ethnicity/Minority	N	Mean	Standard Deviation	Minimum	Maximum
African American	182	3.60	0.42	3.15	4.00
Hispanic American	37	3.57	0.50	3.00	4.00
Asian American	28	3.81	0.28	3.00	4.00
American Indian	10	3.20	0.43	3.00	4.00
Other	9	3.70	0.42	2.93	4.00

Employment

Fellows tend to be employed in academic institutions, or as clinicians in practice settings in the roles of staff nurse, supervisor, coordinator, clinical nurse, charge nurse and nurse specialist. A lesser percentage of the Fellows are employed as researchers; see Figure 14.

Until 1996, two types of fellowships were available to potential Fellows: Clinical and Research Fellowships. (See Section IV for previous discussion about the two types of fellowships). Figure 14 depicts the types of Fellowships that were awarded by ethnicity/minority status. Each of the two fellowships provided similar types of support and both were under the aegis of the EMFP at the American Nurses Association. These data suggest that a large number (25%) of the Fellows were employed as educators in colleges and universities. On the other hand, a substantial number (20%) were working in clinical care settings, providing direct care to patients and their families. Those Fellows who identified themselves as nurse researchers was smaller, or about 5%.

As determined by ethnicity, African Americans received slightly more research fellowships than clinical fellowships. On the other hand, American Indians received more Clinical Fellowships than Research Fellowships, as did Hispanic Americans and those nurses who were classified as Other. Asian Americans received a “near equal” number of Clinical and Research Fellowships, with a slight weighting toward the Clinical Fellowships.

EMFP Fellows' Marital Status

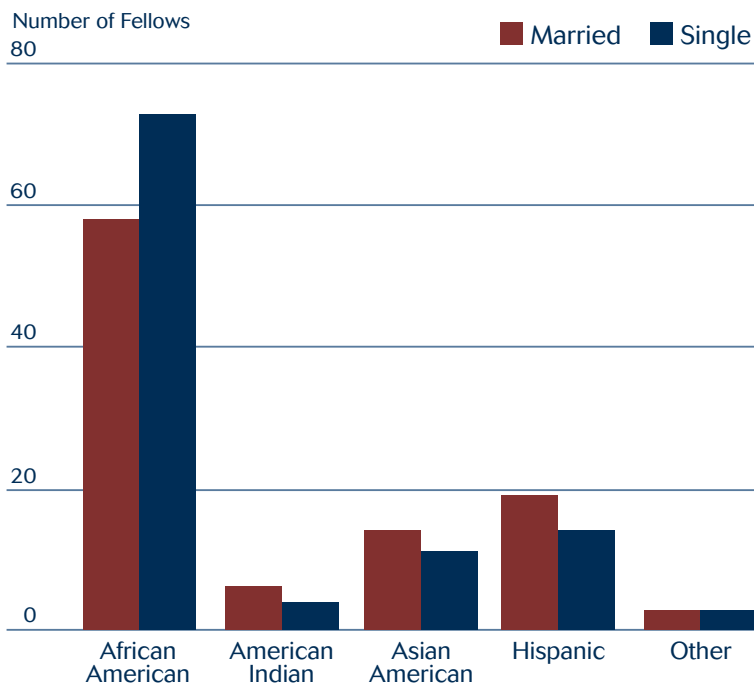


Figure 12.

Percent of Fellows from Different Regions of Country

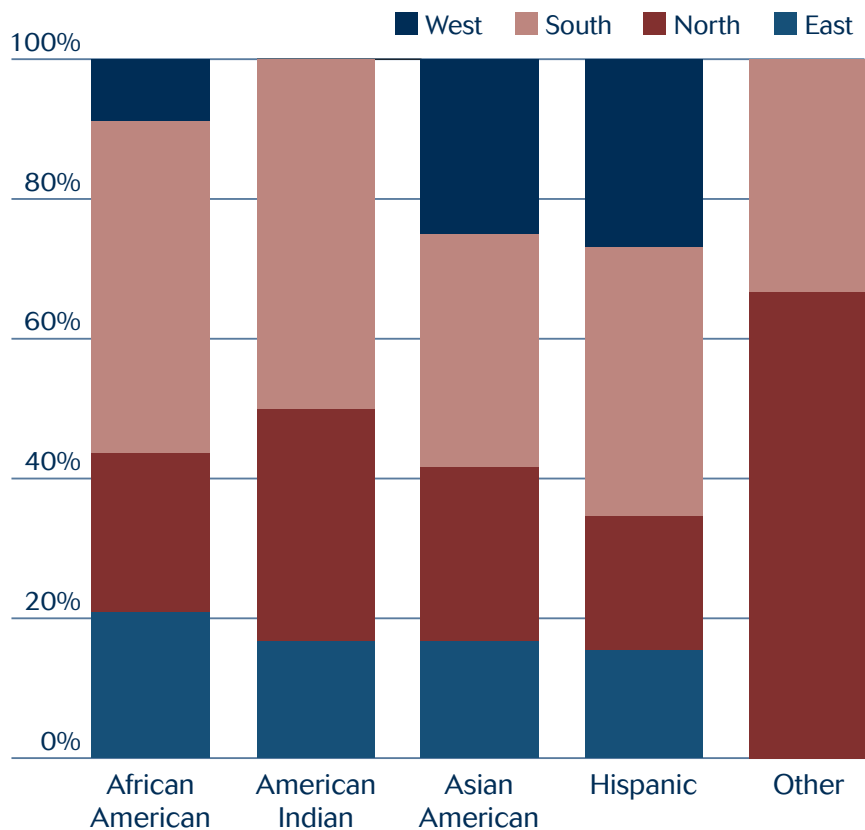


Figure 13.

Fellow's Employment Positions

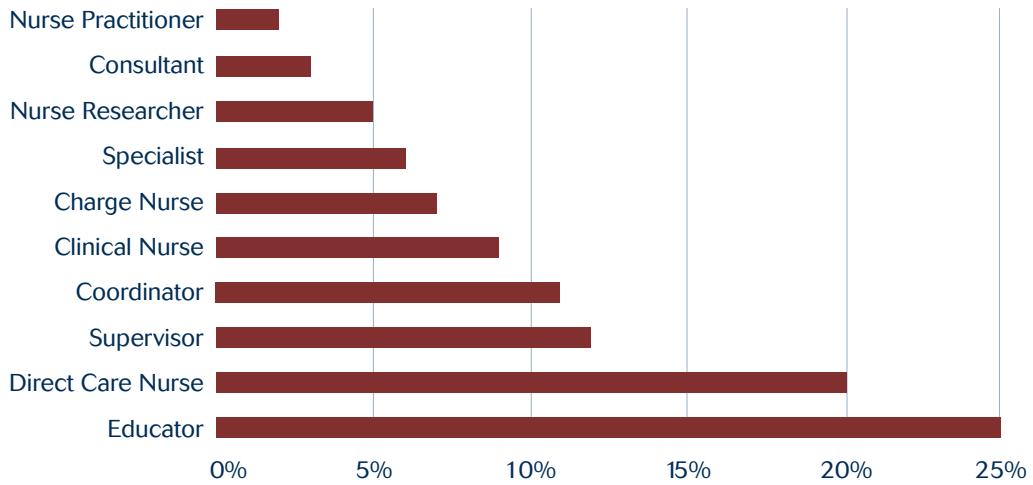


Figure 14.

Percentage of Type of Fellowships for Ethnic/Minority Fellows

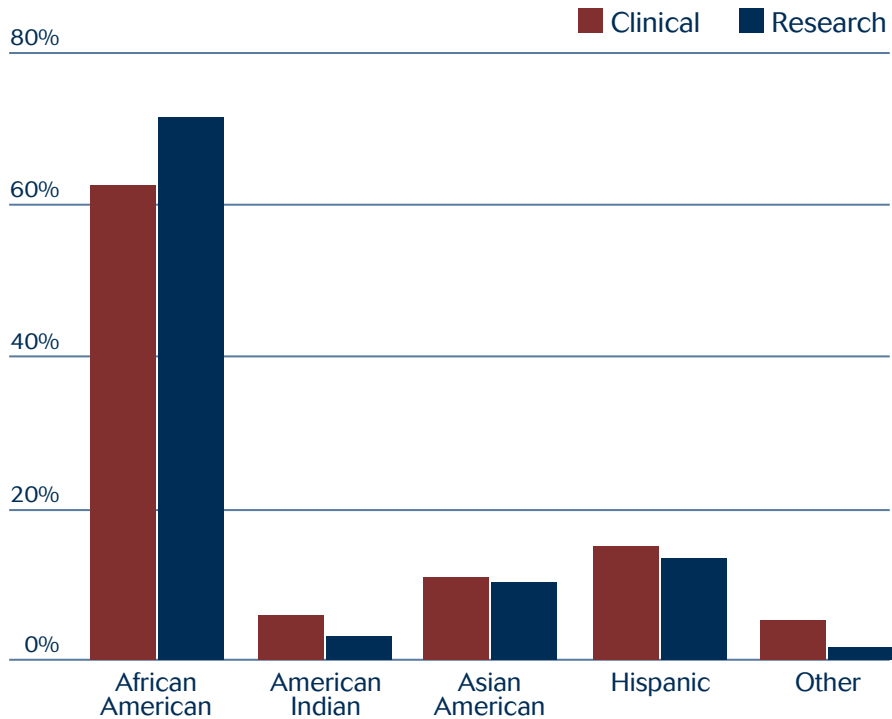


Figure 15.

Fellows' Publications

Fellows continue to make substantial contributions to the scientific community through their research and scholarly writings. Figure 16 details their contributions.

Percentages of Fellow's Publications

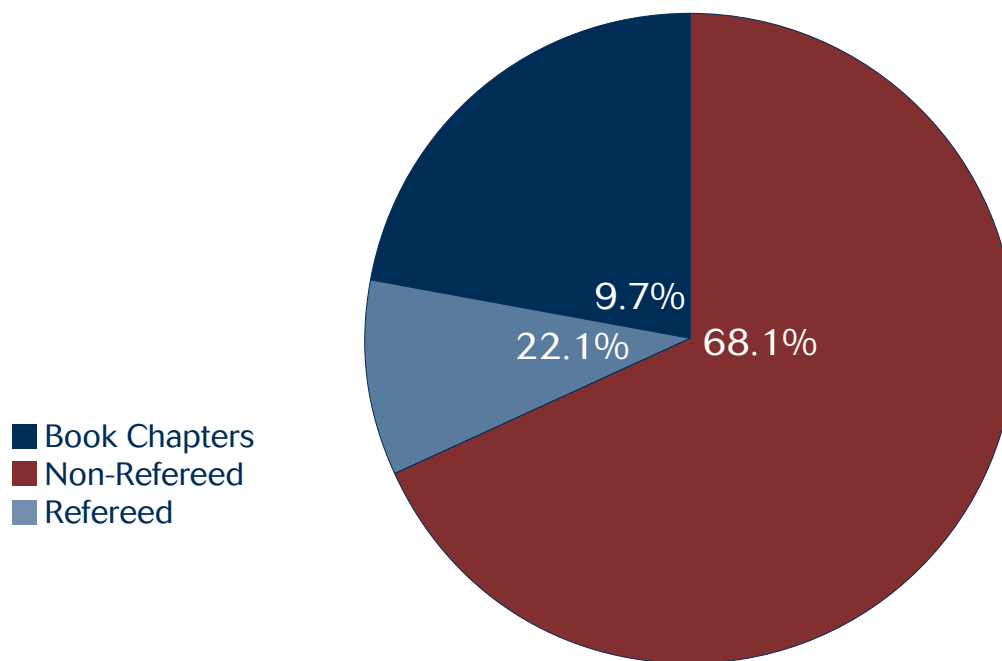


Figure 16.

Data in Figure 16 suggest that the majority of the Fellows' publications appeared in refereed journals (68.1%), followed by non-refereed publications in journals and other documents (22.1%), and then book chapters (9.7%). Clearly, these Fellows have contributed to the scientific base of psychiatric and mental health nursing.

Fellows' Matriculation in Selected Colleges and Universities

The Fellows have been enrolled in 54 different colleges and universities throughout the country. Interestingly, this trend has remained unchanged since the first fellowships were awarded in 1975 (Bessent, 1997). The small numbers of Fellows at each college or university suggest that these nurses may have been the only ethnic/minority students in their doctoral programs. These data also suggest that nurses from specific ethnic/minority backgrounds tend to cluster at certain universities. For example, the universities that enrolled 5 or more EMFP Fellows were the Universities of Arizona and Texas for Hispanic nurses; the Universities of Maryland, California, and Catholic University, Washington, D.C., for African Americans; and New York University for Asian American nurses (although fewer than 5). The students at specific universities were related to the regional locations of members of specific groups, which suggests that few nurses relocate

for educational experiences. In a 1993 evaluation summary of the EMFP, 69 Fellows (33 Clinical, 36 Research) ranked on a scale of 1 (lowest) to 5 (highest) the location of the university as the most important factor in their selection of a doctoral program (Serlin, EMFP Internal Survey, 1998); see Figure 17.

Universities Attended by Fellows

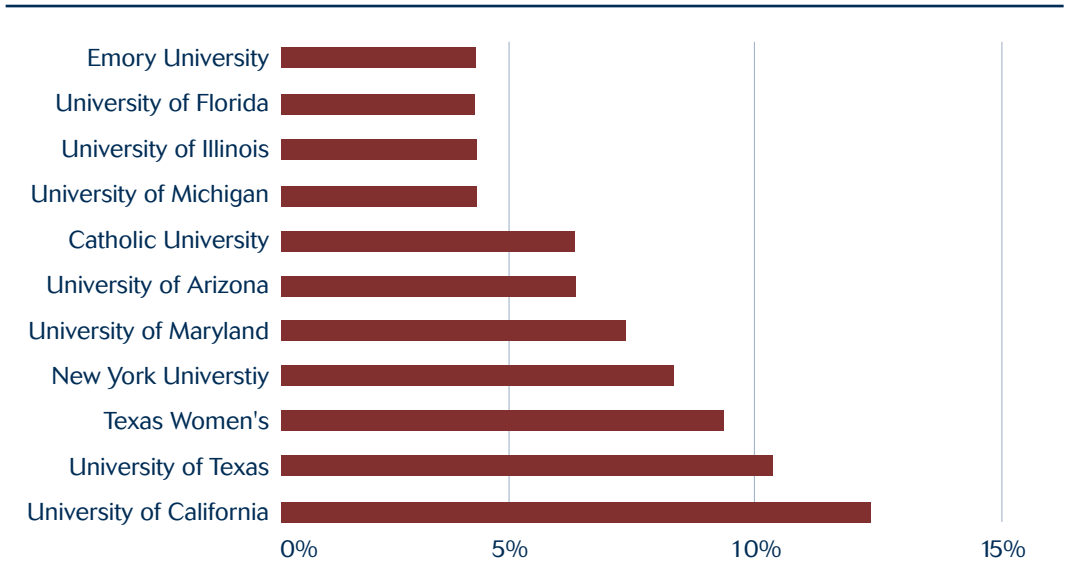


Figure 17.

As illustrated in Figure 17, the highest number of Fellows attended the University of California, followed by the University of Texas, Texas Women’s University and then New York University. This Figure indicates those universities that had at least 4 Fellows in attendance between 1975 and 2000. However, there were at least 43 institutions of higher learning throughout the United States that had enrolled up to 3 Fellows during this time period.

EMFP Fellows’ Dissertations

All Fellows completed dissertations as a required component of their doctoral study. Numerous publications were the direct outgrowth from their initial dissertation research and many of them have continued to pursue a research program that was begun when they were Fellows. Table 6 details examples of the ethnic/minority background, dissertation title, and the year that the Fellow graduated, beginning with 1976 and ending in 2000.

These dissertation titles indicate that the Fellows were interested in mental health issues and psychiatric disorders that confront ethnic/minority people and their families. They continue to make contributions to the scientific literature that impact research, practice, leadership, and policy. Selected abstracts from these dissertations and other research and scholarly articles are featured on the EMFP website, www.nursingworld.org/emfp.

**Table 6. Sample of Fellows' Ethnicity and Research
Dissertation Titles: Years 1976 to 2000**

Ethnic/Minority Demographics	Dissertation Title	Date
African American	Residents' Perceptions of Territorial Rights in Two Homes for the Elderly: An Exploratory Study	1976
African American	The Relationships Between and Among Selected Nurses and Patients on Measure of State Anxiety and Self-Discipline in a Clinical Setting	1977
Hispanic American	An Ethnoscience Study to Determine the Perception, Causation, Resolution and Categorization of Illness for Mexican Americans	1978
African American	The Relationship of Maternal Age to Acceptance and Control in Child Rearing Practices of Young Mothers	1979
African American	Curricular Innovations in Baccalaureate Schools of Nursing	1979
Hispanic American	A Comparative Study of Puerto Rican Families With or Without Identified Mentally Ill Members	1979
American Indian	Caring for the American Indian Patient	1980
African American	The Role of the Professional in Drug Dependency Treatment	1980
Asian American	A Study of Foreign Nurse Graduates: Factors Related to Test Taking	1980
Asian American	Cultural Variations of Sex Role Differences of the Chinese	1980
African American	An Ecological Study of Essential Hypertension	1980
African American	An Investigation of Autonomic Response Patterns during Exposure to Complex Sound Patterns in Black and White Young Adult Females	1980
Hispanic American	Planning change in a Screening Program for Sickle Cell anemia an Sickle Cell Trait in a Rural Clinic	1980
African American	The Role of the Psychiatric Nurse Specialist in the Care of the Chronic Psychiatric Patient in a Community Health Center	1981
African American	Selected Dimensions of Coping in Black Female College Freshmen	1981
African American	Racism as Counter Transference in Psychotherapy Groups	1982
Asian American	A Study of the Family support System as Examined Through Child Rearing Rituals in Katmandu, Nepal	1982
Asian American	Attitudes Toward Death Among Nurses, Physicians, Elementary School Teachers, and Professors in Taiwan, Republic of China	1983
African American	A Comparison of Coping Responses of Non-Depressed Black Females and Clinically Depressed Black Females to Perceived Racial Prejudice an discrimination	1984
Hispanic American	A Comparative Analysis of Wife Abuse Among Anglo-American and Mexican American Battered Women: Attitudes, Nature, Severity, Frequency, and Response to the Abuse	1986

Ethnic/Minority Demographics	Dissertation Title	Date
African American	The Relationship of Adolescent Postnatal Depressive 1988 Symptomatology to Mother and Infant Integrative Behavior and Quality of Stimulation in the Home	1998
African American	The Mentally Disordered Offender in the Criminal Justice System	1989
Pacific Islander	Integrative Aging in Widowed Immigrant Philippines: A Grounded Theory Study	1989
African American	An Attributional Study of Seclusion and Restraints of Psychiatric Patients	1989
American Indian	The Relationship of Self-Esteem, Depression, and Acculturation to Alcoholism Rates in Two Oklahoma Indian Tribes	1990
African American	A Community-Based Educational Approach to Enhance Learning Outcomes in Black Hypertension Patients	1991
African American	The Relationships Between the Perceptions of Rewards, Cost, and Coping Strategies of Black Female Caregivers	1991
African American	Perceptual Determinants of Early Adolescent Health Promoting Behaviors in One Alabama Black County	1992
African American	African American Caregivers and the Chronically Mentally Ill	1993
American Indian	Behavior Problems Among American Indian Adolescents	1993
Hispanic	Development of an Instrument to Measure Culturally Competent Care for Mexican Americans	1994
African American	Coping Strategies and Perceptions of Marital Satisfaction of Parents of Hospitalized Depressed Adolescents	1994
Asian American	Multiple Roles of Korean Immigrant Wives: Impact on Mental Health	1995
Hispanic American	Cognitive Behavioral Process that Affect the Decision of Substance Dependent Schizophrenics in Choosing to Complete Inpatient Treatment	1996
African American	Relationships Between Family Functioning and Female Adolescent Sexual Behavior	1997
African American	Determinants of Help-Seeking Behaviors for African American and Latino Women with HIV/AIDS	1997
African American	The Relationship of Selected Psychological Variables and Coping Strategies Among Low Income African American Women Who Undergo Breast Cancer Screening Procedures	1998
African American	Post-Partum Depression in African American Women	1998
African American	Social psychological Responses of Black Families to Menarche: A Mental Health View	1999
African American	The Relationship of Sense of Coherence, Hope, and Spirituality to Psychosocial Outcomes of breast Cancer in African American Women Over 50 years	2000
Hispanic	The Sleep Architecture of Depressed and Non-Depressed Mexican Americans and Caucasians	2000

Graduation Rates

In spite of the many challenges within the profession and mental health delivery system, the ANA/EMFP has had an impressive success rate. From 1975, when the first cohort of Fellows was selected, through 2000, 266 Fellows received support. Current data suggest that the majority of all Fellows have earned a doctorate. Specifically, the available data showed that 63% of all prior Fellows did complete their doctorates and about 26% are expected to complete their dissertations in the near future.

Post-Graduate Accomplishments

Data about postgraduate productivity of alumni (1991–1997) was solicited by a survey of 147 Research Fellows (financially supported by NIMH funds) via mail, fax, telephone, Internet web searches, and networking with other program graduates. The purpose of the survey was to collect specific information on outcome measures such as completion of the doctorate, attrition, and mental health scholarly productivity through refereed publications, presentations, funded research, academic appointments, and community service. With focused effort, information was obtained on the activities of 91 Fellows (response rate = 62%) who had earned a PhD after receiving funding from NIMH.

Of the 91 respondents, 32% have been awarded research funding and 33% have published in refereed journals. Among those with research funding, 47% studied mental health and illness and psychosocial processes that affect mental health. About 53% were awarded funding to increase ethnic/minority Fellows' retention in schools or colleges of nursing and other research.

Employment Settings and Selected Positions

The available data indicate that Clinical and Research Fellows were employed in a variety of positions and settings in the health care system. However, the predominant employment setting remains the academic institution where Fellows function as faculty members. Fellows in academic institutions were actively engaged in teaching some aspect of research (60%) and mental health (37%). They also function in leadership and public policy promulgation roles as evidenced by their presence in administrative and deanship positions. In these responsibilities, graduates are demonstrating the successful attainment of the objectives of the EMFP, the NIMH, and SAMHSA4 supported Fellowship Programs.

Educators' Positions

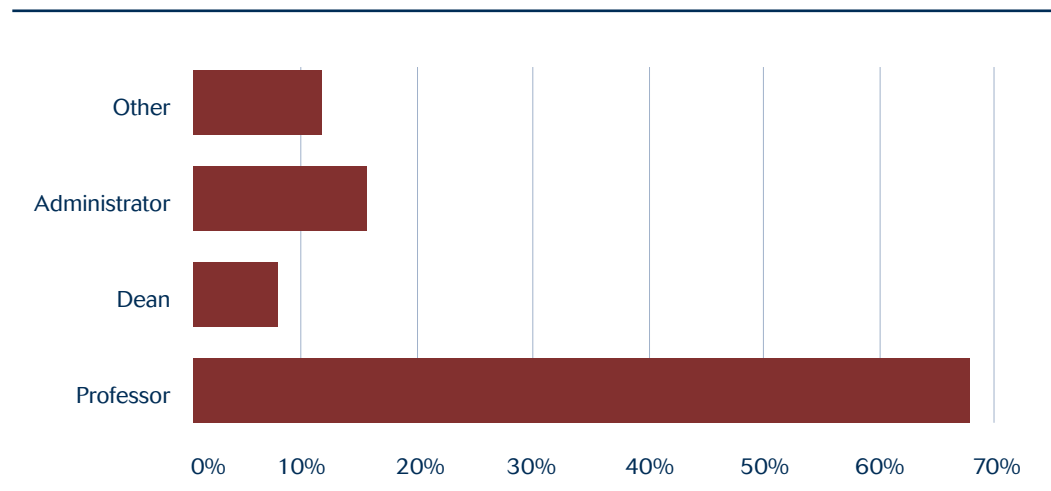


Figure 18.

Estimated Financial Cost of Educating the Fellows

Fellows attended public and private institutions. They could request funding for one to five years, with the request renewable each year. We have calculated the cost of the 266 Fellows' education (stipend and tuition) by taking the average amount of the fellowship over a five-year period and multiplying that number by the total number of Fellows. A 20% administrative cost has been added to this amount. The total cost is calculated to be about \$1,500,000. This calculated cost does not include other fellowship-related activities that are among the known key elements of the EMFP that help to make it a success.