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## Hair Care Catered to You

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# HAIR CARE CATERED TO YOU

Sarah Reynolds, Meg Sorg (*Nursing*)

## STUDENT AUTHOR BIO SKETCH

**Sarah Reynolds** is a Purdue Nursing School graduate from the class of 2020. She is currently employed by Sidney & Lois Eskenazi Hospital in Indianapolis, Indiana, on the Acuity Adaptable floors in a medical-surgical unit. Reynolds is passionate about improving the quality of health care for all, and her professional goals include becoming a flight nurse and participating in passing improved health care legislation.

**Meg Sorg** is a Clinical Assistant Professor with nearly 10 years of clinical practice experience. She has been working as a pediatric nurse practitioner in primary care for the past 6 years; prior to that, she was a pulmonary nurse at Riley Hospital for Children in Indianapolis. She has experience as a teaching assistant and clinical instructor with the Purdue School of Nursing.

## INTRODUCTION/BACKGROUND

When nursing students are learning to care for patients, they are taught to focus on and think about clinical assessment data—vital signs, lab values, visual presentations. Students are also taught to care for the body and to provide holistic care that allows patients to maintain their dignity in the face of vulnerability. It is documented that hair plays a part in one's self-identity and that maintaining the presentation of one's hair is important to self-efficacy and self-esteem (Mbilishaka et al., 2020). It is also known that the textured hair of many Black, Indigenous, and people of color (BIPOC) requires different products and tools than the products used for other hair textures. Despite these facts, the available hair care products for inpatient hospital units are not designed to be used on textured hair and in fact often contain ingredients that may cause damage and breakage to textured hair (Goins, 2012). These factors coupled with my drive to provide equitable care to *all* of my patients

led me to undertake a personally driven service-learning project to provide texture-friendly hair care products to an inpatient pediatric hospital unit in Indianapolis. This project was completed with the help of senior nursing students Laurel Gonsiorowski and Colleen Leonard.

The idea for this project originally came to me in May 2020, around the time when the Black Lives Matter (BLM) movement started gaining more attention in the media. I wanted to contribute to the cause of social justice; I wanted to make my contribution meaningful. I asked myself, "What more can I do to demonstrate my support for the Black community? How can I make the world a better place, today and into the future, for Black individuals?" Since my background is in health care, this seemed like the perfect opportunity to advocate for Black individuals and contribute to the BLM movement; thus, the project was born. Because current hygiene products available in health care settings are tailored to Caucasian skin and hair, I sought to address this problem

in the health care setting. The disparities in the quality of care that African Americans receive in health care are well documented (Seldon & Berdahl, 2020), and this project aimed at taking a stand to address some of these disparities. While my project also included skin care items such as body wash and lotion designed for dry skin, I felt that hair care was the most important aspect of the project, especially considering that hair is deeply rooted and essential to the Black culture (Williams, n.d.).

Research has shown the existence of implicit bias in pediatric medicine (Fitzgerald & Hurst, 2017; Johnson et al., 2017), and this bias impacts patient outcomes in addition to contributing to experiences of racism and discrimination in pediatric health care (Trent et al., 2019). One example of implicit bias in health care is the difference in pain management treatments for black patients. A retrospective study completed by Todd Knox, MD, MPH revealed that black patients were significantly less likely than white patients to receive analgesics for extremity fractures in the emergency room (57% vs. 74%), even though similar self-reports of pain were documented (Hoffman et al., 2016). The same disparity in pain treatment is present among young children as well. For example, another study of approximately one million children diagnosed with appendicitis revealed that black patients were less likely to receive any pain medication at all for moderate pain and were less likely to receive opioids—the appropriate treatment—for severe pain, compared to white patients (Hoffman et al., 2016).

Both parents and children in pediatric hospitals are likely to report lower satisfaction scores related to limited cultural competency in nursing care (Nagarajan et al., 2017). While none of these studies specifically cite the availability (or lack thereof) of ethnic-related hair products, writings point to the significance of Black hair to a person's identity (Joseph-Salisbury & Connelly, 2018) and the specific care and products that Black hair often requires (Neil & Mbilishaka, 2019). Despite this, inpatient hospitals overwhelmingly offer shampoo caps that contain irritating fragrances, harsh alcohols, and heavy parabens that cause tangling and breakage in hair textures commonly seen in Black individuals. Conditioning products are notably absent from supply room shelves. It has been documented that hair care can be beneficial to a patient's self-esteem and sense of self-worth (Goldenhart & Nagy, 2020); however, recommendations of submerging hair in water, shampooing regularly, and manually brushing are based on an assumption of Caucasian-norm hair and do not take into account textural differences that necessitate different products and procedures.

## METHODOLOGY

In the beginning, there was some resistance to this project, some of which related to the COVID-19 pandemic. One of the opinions I received when asking for feedback was, “Don't you think there are more important things to be focusing on right now rather than hair products for people of color, considering the pandemic we are facing? I don't see how this is a priority, especially for grant funding.” While this may be a fair and justifiable opinion, I personally felt this project was crucial. This nation has struggled since its beginning with racism and inequality. For hundreds of years, Black Americans have been discredited, stigmatized, and excluded in our society, and I believe it is past time that we as a nation finally learned to treat our fellow Americans with the respect every human being deserves. I believe it is past time to finally do right by our brothers and sisters of this nation. Despite the disinterest and resistance to my project, I chose to pursue this with or without support from others.

I chose fellow nursing students Laurel Gonsiorowski and Colleen Leonard to help me complete this project and Professor Meg Sorg, DNP, MSN, APRN, CPNP, as a sponsor. Upon starting clinicals in the fall 2020 semester, I was placed at the Peds 4 unit at Payton Manning Children's Hospital (PMCH). I had a conversation with Shannon, the nurse manager of the Peds 4 unit at PMCH, and during this conversation, Shannon disclosed that the only products the hospital provides for bathing and hair care are “bag baths,” shampoo, and soap purchased through a hospital supplier. Bag baths are chemically saturated disposable cloths that are designed to wipe the patient down and/or shampoo the hair without it needing to be rinsed. There were no conditioners, oils, or styling products with extra moisture that are designed to be used in textured hair. Shannon, as well as other nurses on the floor, described the difficulty they have using these products in Black patients' hair. Said Shannon: “It often gets tangled and matted with the hospital products. We started buying products on our own and bringing them in for these patients. We keep them in a drawer at the nurses' station.” We believed that undertaking a service-learning project that allowed us to purchase hair care products specifically designed for textured Black hair for the children's hospital unit would help promote positive self-efficacy and self-esteem for patients and families. A service-learning grant was applied for by three senior-level Purdue nursing students and the funding received from this grant was used to purchase hair bonnets, durags, shampoo, and conditioner tailored for persons of color. Because of Purdue School of Nursing's

relationship with PMCH and the nursing students' pediatric clinical placement there, this site was chosen for the project. PMCH serves a wide demographic of pediatric patients in the Indianapolis metropolitan area and over 27% of the Indianapolis area identifies as African American or Black (Ascension Health, 2019).

Another reason I chose PMCH is because it is a children's hospital. The self-esteem and self-confidence of Black children is often overlooked. The 1946 "Doll Study" conducted by Kenneth and Mamie Clark proved that Black children often see themselves as less appealing or less desirable than white individuals. When given a choice between a black doll and a white doll and asked which doll is the "good doll," both black and white children chose the white doll (Blakemore, 2018). The results of this study are just as devastating today as they were in 1946 when the study was originally conducted by the Clarks. The Doll Study is what drove me to choose a children's hospital for this project. By acknowledging the differences in black patients' hair and providing them with the proper supplies for their hair, we can celebrate their differences in hair, rather than ignore them. This will instill confidence in Black children and show them that they are beautiful too, and that their differences should be celebrated and acknowledged. They should be proud of their unique physical qualities, not ashamed or burdened because of them. Instilling this kind of confidence can be achieved by caring for their hair properly in the inpatient setting and demonstrating that we do acknowledge their differences.

Because this project was aimed at supporting equity among Black patients, we felt that it was extremely important to choose our products carefully. We chose shampoo and lotion from the company Oyin, which is a Black-owned business that specializes in hygiene products for people of color. The bonnets came from Brellaluchi-hair, which is also a Black-owned business. Choosing Black-owned businesses was important to me because this was another way we could demonstrate support for the Black community and the BLM movement (Figure 1).

After completion of the project, we held another discussion with Shannon, the unit manager for PMCH Peds 4. This conversation was aimed at determining whether the addition of the products we purchased helped with patient hair-care experiences on the unit.

## RESULTS AND COMMUNITY IMPACT

The products were delivered to PMCH and distributed to the Peds 4 unit. We also provided them with coupons



**Figure 1.** Senior nursing student Sarah Reynolds opening the first delivery of products that was ordered.

from Brellaluchi-hair in hopes that PMCH would place a second order for more products in the future. While we did not get to personally witness the results of the project, we successfully achieved our goal of expanding the inclusion of Black patients at PMCH. As Martin Luther King Jr. said, "Nothing in all the world is more dangerous than sincere ignorance and conscientious stupidity." This project brought awareness to the lack of products available for Black patients' hair and also demonstrated our support for equity in patient care. Our goal is that this project resulted in building higher self-esteem and self-confidence in hospitalized Black children.

This project impacted the nurses working at PCMH by giving them the tools they needed to improve their care of Black patients. These nurses are now better prepared to deliver safer, more appropriate hair and hygiene care to their Black patients. While we cannot pinpoint the exact number of patients that will be impacted by these changes, we can make approximations. There are 20

beds on the Peds 4 unit of PCMH, and with those beds regularly admitting and discharging patients, it is easy to imagine how many Black patients will be impacted by the differences made to this unit. These changes impact PCMH as a whole by allowing them to be more inclusive of their Black patients and their specific needs regarding hair care.

This project also impacted Professor Meg Sorg's future teaching for nursing students. She will include these ideas of inclusivity and improving the patient care of Black patients. It is important that we educate future nurses about the importance of tailoring care for the patients, and this includes the hair and skin care of BIPOC. This project has impacted the school of nursing by expanding the education of students to include proper hair and skin care of Black patients. Professor Meg Sorg is also hopeful that she will be able to repeat the project at other hospital locations in the future, specifically at Sidney and Lois Eskenazi Hospital in Indianapolis. If she is able to obtain funding for a second trial of this project, I would be assisting with this project as the sponsor, because I am currently a nurse employed at Eskenazi. This would greatly expand the community impact that this project originally had (Figure 2).



**Figure 2.** Senior nursing student Sarah Reynolds delivering the products to the Peds 4 unit of Peyton Manning Children's Hospital.

## STUDENT IMPACT

As a student, this project personally affected me by challenging me to seek solutions to a problem that I saw in my nursing career that I was very passionate about. I was very driven to see this project to its completion, despite the resistance and objections I faced. When I first had this idea, I decided to reach out to the professor I respected the most and ask her for her thoughts. Professor Sorg was thrilled with the idea and encouraged me to apply for a service-learning grant from Purdue University. She generously offered to be the sponsor of the project. As a leading professor and clinical assistant instructor of the Pediatric Nursing course at Purdue, and with almost 10 years of clinical practice experience, she was the perfect choice for the project sponsor. This project revealed the obvious lack of research regarding Black patient hair care. Because research focusing on Black hair care in inpatient settings is limited, this project can open the door for future study. Further research must be done to investigate the impact of hygienic care products on hospitalized Black patients. Due to the growth and expansion of this project, I am certain that I chose the best person possible to lead the project and co-author this article with me.

Professor Meg Sorg shares the impact of this project upon herself as the sponsor. She summarizes,

Over the past year, I have watched, alongside my fellow Americans, the chaos of the world around us. As a pediatric nurse practitioner and educator, I felt helpless as I witnessed disparities and inequities in health care continue to increase as Black Americans were disproportionately affected by the morbidity and mortality of the global pandemic. When Sarah approached me with the idea of a service-learning project focused on delivering hygiene products tailored for Black skin and hair to the pediatric hospital where my students did their clinical rotations, I was excited at the thought. I did wonder, "Is this enough? Is this important right now when people are dying and violence is heightening?" I began reading articles that discussed self-efficacy and self-esteem related to appearance of hair and how different textures of hair need different care and product than what is traditionally marketed toward the general population (read: Caucasian hair). And then I thought of my patients—the children who are already vulnerable by age and circumstance—and I realized that Sarah's project was a great way to promote and strive for equity. If we do not seek equity in the simple, everyday things—like hair

products—then we will never truly reach equity in our society.

I chose Laurel Gonsiorowski and Colleen Leonard as partners for the project to help me achieve my goal. This allowed me to collaborate with other driven nursing students and gain creative ideas and insight that I would not have been able to achieve on my own. I wanted passionate students to help me ensure that this project was the best it could possibly be. Originally, I was quite anxious about pursuing this project because, in addition to the critiques I had already received, I also feared being labeled a “white savior” and I questioned whether or not it was my place to speak on behalf of Black individuals. The last thing I wanted to do was offend anyone from the Black community. I feared this project would be insulting because this project in no way fixes the intricate barriers BIPOC face in receiving quality health care. This project could never make up for the injustices that many Black patients face, and I didn’t want this project to be seen as trying to offer a permanent solution to the problem. This project was strictly a starting point to addressing the inequalities in health care for Black patients. I even struggled with finding the appropriate terms to use in this paper, because I was so worried about offending the Black community. Every Black individual has his or her own preference. Some would prefer that others use the term person of color (POC) or BIPOC, while others would prefer ethnic, and others might prefer African American or Black.

These concerns weighed on me so heavily that I reached out to as many Black individuals as I could to gather opinions. Their responses were overwhelming and solidified my belief that this project mattered. For instance, a friend of my mother’s that I have never personally met sent me a card that read, “At just the right time, at just the right place, you were there,” along with a written message that thanked me for speaking up for Black patients. I was humbled beyond words and almost heartbroken by their responses. Something that seemed so small and so obvious to me meant the world to people who face struggles that I will never understand. I felt that their gratitude and thanks weren’t necessary because I should never have had to do this project to begin with. This is something that should have been addressed a long time ago, and I am frustrated that this problem still exists. I decided that it was my responsibility and my duty as a nurse to use my voice to advocate for Black patients, and that not completing this project would be a disservice to all of my patients. I take so much pride in my efforts to improve patient care for Black patients, and

this project was a rare opportunity to have a serious impact on the standards of nursing care.

Another impact of this project was finding a new barrier to delivering proper hair care to Black patients. While completing this project, I realized that I was not familiar enough with BIPOC hair care and styling to be able to properly cleanse and style Black patients’ hair. This opened the door to a new level of possibilities for future projects. I decided the next step in this project is to educate health care workers about how to style and groom Black patients’ hair. As a nurse, I am ashamed by the fact that I would be clueless if a Black patient needed assistance with washing and styling his or her hair. It is utterly unacceptable that I am unable to provide the proper care to all my patients, and upon some light questioning of coworkers, it quickly became evident that I am not the only one who is clueless. This was very alarming to me and pointed to the need for more education. Workplaces pride themselves on diversity and inclusion training and seminars, and most of these events contain repetitive PowerPoints and lectures about how we must appreciate diversity in the workplace and be inclusive of others with cultural differences. I believe one of these repetitive lectures should be substituted with a hands-on course to teach health care workers how to properly style and care for Black patients’ hair. It is time to stop talking about it and actually do something about it. This course or demonstration would be beneficial to all health care employees that directly participate in patient care. I know now that I am not the only one who needs education, and I believe educating health care staff about the unique demands of Black patients’ hair would help us achieve the goal of improving patient care for BIPOC.

I was humbled by the experience to try to benefit others and create a positive change in the nursing world. This project can be carried into participating students’ professional careers as well as my own as we advocate for similar changes in other inpatient facilities. I am so thankful that Purdue Service-Learning was willing to fund this project and give me the opportunity to pursue something that I have so much passion for.

## CONCLUSION

By making these changes to Peyton Manning Children’s Hospital, we sought to improve the patient care for Black patients. We are hopeful that through this project and paper, we can also spread awareness of the health care disparities and barriers that exist for Black patients. While we still believe there is much improvement to be done in health care for Black patients, we truly hope that

this project is taking steps to address these disparities and begin to change the attitude of health care workers toward Black patients. I hope this project sparks a greater change in the health care setting for people of color, and I dream that one day all patients, regardless of color, will be treated with the same high-quality care that every human being deserves.

## REFERENCES

- Ascension Health. (2019). 2019 community health needs assessment. Retrieved from file:///C:/Users/mjbrock/Downloads/2019%20St%20Vincent%20Indianapolis%20Hospital%20CHNA%20Report.pdf
- Blakemore, E. (2018). How dolls helped win *Brown v. Board of Education*. Retrieved from <https://www.history.com/news/brown-v-board-of-education-doll-experiment>
- Fitzgerald, C., & Hurst, S. (2017). Implicit bias in healthcare professionals: A systematic review. *BMC Med Ethics*, 18(1).
- Goins, L. (2012). Expert Q&A: African-American hair care. Retrieved from <https://www.webmd.com/beauty/features/expert-q-and-a-african-american-hair-care#1>
- Goldenhart, A. L., & Nagy, H. (2020). Assisting patients with personal hygiene. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK563155/>
- Hoffman, K. M., Trawalter, S., Axt, J. R., & Oliver, M. N. (2016). Racial bias in pain assessment and treatment recommendations, and false beliefs about biological differences between blacks and whites. *Proceedings of the National Academy of Sciences of the United States of America*, 113(16), 4296–4301.
- Johnson, T. J., Winger, D. G., Hickey, R. W., Switzer, G. E., Miller, E., Nguyen, M. B., Saladino, R. A., & Hausmann, L. (2017). Comparison of physician implicit racial bias toward adults versus children. *Academic Pediatrics*, 17(2), 120–126. <https://doi.org/10.1016/j.acap.2016.08.010>
- Joseph-Salisbury, R., & Connelly, L. (2018). “If your hair is relaxed, white people are relaxed. If your hair is nappy, they’re not happy”: Black hair as a site of “post-racial” social control in English schools. *Social Sciences*, 7(219). <https://doi.org/10.3390/soesci7110219>
- Mbilishaka, A., Ray, M., Hall, J., & Wilson, I. (2020). “No toques mi pelo” (don’t touch my hair): Decoding Afro-Cuban identity politics through hair. *African and Black Diaspora: An International Journal*, 13(1), 114–126. <https://doi.org/10.1080/17528631.2019.139298>
- Nagarajan, N., Rahman, S., & Boss, E. F. (2017). Are there racial disparities in family-reported experiences of care in inpatient pediatrics? *Clinical Pediatrics*, 56(7), 619–626. <https://doi.org/10.1177/0009922816668497>
- Neil, L., & Mbilishaka, A. (2019). “Hey curlfriends!”: Hair care and self-care messaging on YouTube by black women natural hair vloggers. *Journal of Black Studies*, 50(2), 156–177. <https://doi.org/10.1177/0021934718819411>
- Roseborough, I. E., & McMichael, A. J. (2009). Hair care practices in African-American patients. Elsevier. Retrieved from <https://www.mdedge.com/dermatology/article/56592/hair-nails/hair-care-practices-african-american-patients>
- Seldon, T. M., & Berdahl, T. A. (2020). Covid-19 and racial/ethnic disparities in health risk, employment, and household composition. *Health Affairs*, 39(9), 1624–1632. <https://doi.org/10.1377/hlthaff.2020.00897>
- Trent, M., Dooley, D. G., & Douge, J. (2019). The impact of racism on child and adolescent health. *Pediatrics*, 144(2), e20191765. <https://doi.org/10.1542/peds.2019-1765>
- Williams, A. (n.d). The connection between hair and identity in black culture. *C+R Research*. Retrieved from <https://www.crrresearch.com/blog/connection-between-hair-and-identity-black-culture>

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Reynolds, S., & Sorg, M. (2021). Hair Care Catered to You. *Purdue Journal of Service-Learning and International Engagement*, 8, 86–91. <https://doi.org/10.5703/1288284317416>