Lesson Plan

Integrating 2026 NCLEX-RN® standards for health equity and unbiased care

👤 Audience: **Registered Nursing Students (RN)**

🕐 Duration: **45 minutes**

📖 Delivery Method: **In-Person**

Learning Objectives

By the end of this lesson, students will be able to:

- Perform comprehensive assessments applying principles of health equity in nursing practice.

- Implement nursing interventions that ensure unbiased treatment for diverse client populations.

- Provide nursing care that supports equal access regardless of culture, ethnicity, sexual orientation, or gender identity.

- Recognize and manage implicit biases to prevent disparities in care, such as stereotyping pain management needs.

- Use inclusive and gender-neutral language respecting clients' preferred terminology in communication and documentation.

Lecturio **NURSING**

Key Content and Concepts

Health equity vs equality:	Understanding that equitable care meets individual needs rather than providing the same care to all.
Social determinants of health:	How race, ethnicity, socioeconomic status, and other factors impact health outcomes.
Comprehensive assessment for health equity:	Gathering culturally relevant data, respecting individual contexts.
Unbiased nursing interventions:	Strategies to ensure equal access and quality care for diverse populations, including sexual orientation and gender identity.
Implicit bias in nursing:	Recognizing unconscious biases, such as assumptions about pain tolerance, and strategies to mitigate these biases.
Inclusive language:	Using gender-neutral and client-preferred terminology in verbal and written communication.
Case studies and scenarios:	Practical examples demonstrating bias mitigation, equitable care decision-making, and culturally competent communication.

Teaching Activities and Strategies

Time (min)	Activity description
0 – 5	**Introduction:** Present lesson objectives and the importance of health equity in nursing, referencing NCLEX-RN 2026 standards.
5 – 15	**Mini lecture:** Explain key concepts: health equity, social determinants, implicit bias, inclusive language. Use multimedia slides with definitions and examples.
15 – 25	**Group discussion:** Present short case studies illustrating health disparities and implicit bias. Students discuss how to apply health equity principles.
25 – 35	**Role-playing activity:** Students practice client assessments using inclusive language and unbiased approaches; facilitators provide feedback.
35 – 40	**Reflection:** Guided reflection on personal biases and strategies to improve unbiased care using structured questions.
40 – 45	**Summary and Q&A:** Recap key points, answer questions, and discuss integration into nursing curriculum/practice.

Detailed Activity Instructions

Mini lecture (5 – 15 minutes)

Faculty script and slide guide:
Speak clearly, pause to encourage questions, and use relatable examples.

1 **Title:** "Health Equity, Social Determinants, Implicit Bias & Inclusive Language" with NCLEX-RN 2026 reference.

2 **Health equity:** Define health equity, distinguish from equality, provide examples of tailored care.

3 **Social determinants of health:** List key determinants and illustrate their effects; emphasize comprehensive assessments.

4 **Implicit bias:** Define unconscious bias; cite examples like stereotyping pain tolerance; introduce mitigation strategies.

5 **Inclusive language:** Stress importance of preferred pronouns and gender-neutral terms; provide respectful communication tips.

6 **Summary:** Reinforce professional and ethical necessity of these principles.

Group discussion (15 – 25 minutes)

Preparation: Divide students into small groups (3 – 5). Distribute printed copies of one case study per group.

Case 1:
Pain management disparity based on assumptions about a Hispanic patient's pain

Maria, a 45-year-old Hispanic woman, is admitted with severe abdominal pain after surgery. She requests additional pain medication, but the nursing staff suspects exaggeration based on stereotypes about Hispanic pain tolerance.

Discussion points:
Identify bias influencing care, ways to assess pain objectively, strategies to provide equitable pain management.

Case 2:
Transgender client experiencing disrespectful pronoun use affecting care access

Alex, a 30-year-old transgender man (he/him), is repeatedly misgendered by staff despite corrections, leading to reluctance to share health concerns.

Discussion points:
Impact of pronoun misuse on care, creating respectful communication, inclusive nursing practices.

Case 3:
Elderly patient unfairly labeled as non-compliant due to socioeconomic factors

Mr. Johnson, 78, with heart failure, misses medication doses. Staff label him non-compliant without investigating barriers like income or transportation.

Discussion points:
Social determinants affecting adherence, sensitive assessment techniques, interventions to support adherence.

Case 4:
Refugee patient with language barriers and inadequate discharge instructions

Fatima, 40, a refugee with limited English, receives discharge instructions only in English, causing confusion about medications and follow-up.

Discussion points:
Risks from language barriers, role of interpreters, equitable discharge planning.

Case 5:
Ageism and racial bias causing delayed cardiac care

Mrs. Thompson, 70, African American, presents with chest pain but is misdiagnosed as anxious due to age and race biases, delaying care.

Discussion points:
Effects of ageism and racial bias, advocating for timely care, combating stereotypes in clinical settings.

Faculty facilitation:

Clarify task:
Identify implicit bias/disparities and discuss application of health equity.

Monitor groups; prompt with questions like "What biases might influence this scenario?", "How would you apply equitable care here?"

Allow 7 minutes discussion; groups then share key insights (~1 minute each).

Summarize lessons learned and best practices.

Role-playing activity (25 – 35 minutes)

Faculty steps:

1 Divide class into pairs or triads (roles: nurse, client, observer).

2 Provide role-play scenarios and inclusive language guides:

- Scenario 1: Non-binary client requiring they/them pronouns.
- Scenario 2: Hispanic client with socioeconomic challenges.
- Scenario 3: Gay man with partner; emphasis on respectful relationship acknowledgment.

3 Instruct students to practice client assessments with inclusive, unbiased communication and explore social determinants of health.

4 Each role-play lasts 3 minutes, followed by 2 minutes feedback; rotate roles.

5 Faculty observes and provides targeted feedback on communication, bias recognition, questioning skills, and documentation.

6 Debrief with group discussion on challenges and strategies learned.

Reflection (35 – 40 minutes)

Instructions to faculty: :

- Create a respectful, confidential environment.

- Have students write brief reflections answering:

  - What implicit biases did you identify in yourself?
  - How might these biases influence your care?
  - What strategies will you use to recognize and manage bias?
    How will you ensure use of inclusive language?
  - What resources will support your continued growth?

- Optionally invite volunteers to share insights.

- Emphasize ongoing commitment to unbiased care.

Summary and Q&A (40 – 45 minutes)

Faculty recap:

- Equitable care is patient-centered and meets individual needs.
- Social determinants profoundly affect health outcomes.
- Comprehensive assessments require cultural sensitivity.
- Recognizing and mitigating implicit bias improves care quality.
- Inclusive language builds trust and respect in patient relationships.
- These principles align with NCLEX-RN 2026 standards and promote better outcomes.

Q&A: Invite questions, clarify concepts, and encourage lifelong learning.

Assessment Methods and Faculty Guidance

Formative assessment: What to observe

Active participation:
Are students engaged and contributing thoughtfully?

Bias recognition:
Do students identify implicit bias or social determinants accurately?

Application of health equity:
Are they tailoring care to individual needs?

Reflective awareness:
Do students acknowledge their own biases?

Respectful communication:
Is communication culturally sensitive and non-judgmental?

Inclusive language use:
Are preferred names/pronouns requested and respected?

Examples:

- Student corrects pronoun use per patient preference.
- Group challenges stereotypes in case discussion.
- Nurse role-player inquires about social barriers instead of assuming non-compliance.

Providing feedback:

- "Great job confirming pronouns before proceeding."
- "Avoid assumptions about medication adherence without exploring barriers."
- "Recall that bias can negatively impact pain management."

Reflection submission: What to evaluate

Insight:
Does the student self-identify biases?

Understanding impact:
Do they explain how biases affect care?

Inclusive language:
Is there a commitment to respectful communication?

Resource use:
Does the student mention ongoing education or support?

Strategies:
Are bias mitigation plans clear and realistic?

Sample reflection: "I realized I sometimes assume older adults feel less pain, risking undertreatment. I will ask patients openly about pain and consistently use inclusive language."

Health Equity, Implicit Bias, and Inclusive Language

Optional quiz (10 questions)

1. What distinguishes health equity from health equality?

a. Equal resources for all
b. Resources tailored to individual needs
c. Equal access only to preventive services
d. No difference between the two

2. Which is an example of social determinants of health?

a. Age
b. Socioeconomic status
c. Blood pressure
d. Allergies

3. Implicit bias in nursing can cause:

a. Fair care for all
b. Unintentional disparities
c. Faster decisions without impact
d. Elimination of stereotypes automatically

4. What reduces implicit bias during assessment?

a. Gut feelings
b. Structured checklists
c. Stereotyping
d. Ignoring cultural factors

5. Inclusive language means:

a. Assuming pronouns by appearance
b. Using gender-neutral terms unless specified otherwise
c. Avoiding names and pronouns
d. Using medical jargon exclusively

6. A patient prefers they/them pronouns; nurse should:

a. Ignore and use legal name
b. Use preferred pronouns in all communication
c. Avoid pronouns
d. Use traditional binary pronouns

7. Respectful way to ask about social determinants:

a. "Are you homeless?"
b. "What challenges do you face accessing care?"
c. "Do you have a job or family?"
d. "You can afford your meds, right?"

8. Assuming pain tolerance based on ethnicity is:

a. Cultural competence
b. Implicit bias
c. Patient advocacy
d. Evidence-based practice

9. Using inclusive language in documentation is important because:

a. Documentation is clinical
b. It respects the patient's identity
c. Documentation doesn't affect care
d. Simplifies paperwork

10. Unbiased nursing interventions mean:

a. Same care for all
b. Adjust care based on individual needs
c. Only focus on physical symptoms
d. Avoid diversity discussions

Answer Key: 1-b, 2-b, 3-b, 4-b, 5-b, 6-b, 7-b, 8-b, 9-b, 10-b