



What are Chinese nurses' experiences whilst working overseas? A narrative scoping review



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ARTICLE INFO

Keywords:

Chinese nurse
Emigrants and immigrants
Experience
Immigrant nurses
Scoping review

ABSTRACT

Background: Transnational nurse migration has become an apparent attribute of the global nurse shortage and it is foreseeable that China will play an increasingly significant role in nurse exports. These nurses have unique cultural and professional needs throughout their journey of migration and in-depth analysis of Chinese migrant nurses' experiences is urgently required to manage and empower an ethnically diverse workforce.

Objective: To synthesise Chinese migrant nurses' experiences by examining the findings of existing studies.

Design: Scoping review methods incorporating narrative synthesis were conducted.

Method: Arksey and O'Malley's five-stage scoping review framework was utilised to identify Chinese migrant nurses' experiences. 13 databases were searched, and 5009 articles were retrieved. After screening the titles and abstracts, 169 articles were assessed in full text for eligibility, and finally 22 articles plus 2 manually included ones, representing 19 discrete studies, were further analysed and synthesised with a three-step narrative synthesis.

Results: 13 qualitative studies, 5 quantitative studies and 1 mixed- methods study met inclusion criteria. Two main themes were identified. "Contexts and migration" comprised three subthemes: perceptions of nursing, original culture and nursing differences. "The self and migration" included four subthemes: initiating, transition, reality and future.

Conclusion: This scoping review revealed the literature on Chinese migrant nurses and provided insight into their stories and circumstances. There were external factors which affected Chinese nurses' interpretations and choices. Throughout their migration journeys, they encountered various challenges and also successes. They responded with positive or negative behavioural and psychosocial changes.

What is already known about the topic?

- Migrant nurses' acculturation to new work environments frequently gives rise to multidimensional challenges.
- China is predicted to be an increasingly important supplier of nurses on the global market in the foreseeable future.
- Migrant nurses are not a homogeneous group and there is a paucity of research focusing on Chinese migrant nurses.

What this paper adds

- Some persistent external factors have an impact on all perceptions of inner self changes and decisions of Chinese migrant nurses.
- Chinese nurses went through stages of initiating, transition, reality and future. Features of the different stages varied.
- Chinese nurses responded positively or negatively, reflecting on

behavioural and psychosocial changes.

1. Introduction

In a world of ongoing nursing shortages, international movement of the nursing workforce has become an obvious feature (Moyce et al., 2016). Recent decades have seen rapid growth of nurse shortages in many countries, especially developed countries (Buchan et al., 2014; Marcus et al., 2014). International nurses have constituted a significant proportion of the nursing workforce in countries such as the USA, Canada, the UK and Australia (Buchan et al., 2014; Covell et al., 2014; Marcus et al., 2014; Walani, 2015; Xiao et al., 2014). Historically, the highlighted sources for nurse migration were Asian countries such as the Philippines and India (Dywili Bonner and O'Brien, 2013; Zhou et al., 2016), and other developing countries such as Africa and the Caribbean (Dywili Bonner and O'Brien, 2013).

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Previous research on the experience of migrant nurses has suggested that their acculturation to new work environments frequently gave rise to multidimensional challenges (Kishi et al., 2014; Xiao et al., 2014; Zhou, 2014), although migration could generate some improvements in life and work (Marcus et al., 2014; Zhou et al., 2016). Migrant nurses commonly describe feeling “strange” or “unfamiliar” in their new country (Murphy, 2008). They are isolated as outsiders and their distinctive attributes are neglected (Baptiste, 2015; Moyce et al., 2016; Xiao et al., 2014). The hardships which migrating nurses have suffered have been recognized by several scholars. Such hardships involve communication challenges, cultural differences, struggling on the journey to registration, downward mobility and de-skilling (Allan and Westwood, 2016; Baptiste, 2015; Moyce et al., 2016; Walani, 2015; Xiao et al., 2014). Particularly for migrant nurses from Asian countries such as China, Philippines, India, Malaysia and Korea, the adjustment process differs from that of migrants from Europe (Willis and Xiao, 2014). Compared with their Western co-workers, Asian nurses may be profoundly different in professional and personal needs, which eventually affects their relationships with patients, colleagues, other health care workers, employers and the host country (Liou and Cheng, 2011). Moreover, the global economic crash in 2008 and the adoption of the WHO Code in 2010 have exerted a large influence on international recruitment patterns, worsening circumstances and employment opportunities for migrant nurses (Buchan et al., 2013; Squires et al., 2016).

Historically, China, as a major Asian country, was not a nurse-exporter (Xu, 2006; Zhou et al., 2016). It was not until the Chinese government adopted an open-door policy in 1978 that some mainland nurses began to migrate overseas. With the policy of sending nurses abroad evolving to a fully-fledged, engaged national development strategy (Xu, 2006), a growing number of Chinese nurses have been working overseas. It is predicted that China will become a major player on the global nursing market in the foreseeable future (Zhou et al., 2016). Research reveals that Chinese nurses’ experiences to some extent typify those of international nurses generally (Ho, 2012; Zhou, 2014). As Griffiths (2001) stated, “foreign-educated nurses bring ways of knowing, embedded in the language and culture of their experiences” (Griffiths, 2001) (p. 19). Chinese nurses can bring their talents, abilities and skills to the international workplaces, thereby enriching the culture and the health system of those host countries. Apart from this enrichment, a good migration experience can lead to not only an improved nursing retention rate (Bhandari et al., 2015), but also expansion of international migrant nurses seeking re-entry into the nursing profession.

Nevertheless, migrant nurses are not a homogeneous group. These nurses from diverse countries have their own unique issues and needs when they make efforts to become accustomed to nursing practice in a host country. The experience of Chinese migrant nurses deserves serious and rigorous examination for several reasons. First of all, migration of Chinese nurses can be seen as a “quick fix” for the current international nurse shortage (Zhou et al., 2016). The influx of Asian nurses constitutes the largest proportion of international nurses (Liou and Cheng, 2011), while China is anticipated to be of increasing significance for nurse exports because of its large labour pool (Zhou, 2014). Secondly, the learning of Chinese migrant nurses contributes to stabilization of the substantial numbers of Chinese immigrants. As Western countries undergo significant demographic change, these changing demographics highlight the importance of multicultural and multilingual nursing professionals in healthcare settings. As the U.S. Census Bureau reported, Chinese was the largest detailed Asian group, according to tallies of the number of Asian responses, in the country at 4.0 million (The U.S. Census Bureau, 2012a,b). Furthermore, the Asian population, as the fastest-growing racial group, is projected to be 34.4 million in the U.S. in 2060, comprising 8.2% of the nation’s total population (The U.S. Census Bureau, 2012a,b). Similarly, Chinese is the third largest group among immigrants in Australia and one of the three

main groups accounting for most of the immigrants living in Canada, with the proportion predicted to increase (Australian Bureau of Statistics, 2017a,b; Statistics Canada, 2017). These data reflect urgent and continual requests in health workplaces of western countries for health care professionals with Chinese backgrounds (Ho, 2015). Chinese nurses have the cultural context of Chinese speaking immigrants and can provide culturally congruent care (Zhou et al., 2016). Thirdly, further research on Chinese nurses who work overseas would be beneficial to both the larger health care system and the nursing profession.

In terms of both organisational benefits and humanitarian considerations, in-depth analysis of Chinese nurses’ experiences whilst working overseas is needed. There is a growing body of literature on the lived experiences of international nurses working in foreign environments and there has been research about issues encountered by sub-groups of international nurses. Some scholars have integrated existing data concentrating on the Philippines, India, black (African) and minority ethnic (Asian) nurses (Likupe, 2006; Lin, 2009; Obrey and Vydelingum, 2005; Woodbridge and Bland, 2010; Xu, 2007). There is a scarcity of research, however, focusing on those nurses who had migrated from China. To date, there is no scoping review synthesising the available evidence from studies of Chinese migrant nurses. Accordingly this review is a beneficial and imperative addition to international knowledge. It aims to provide a broad overview and to map major themes underpinning the adjustment experience of migrant nurses from China, recognizing the types, sources of and gaps in evidence, and determining future research needs.

2. Method

A scoping review was performed, with the review process directed by the refined version of the methodological framework of Arksey and O’Malley (2005). Scoping reviews are used to assess and synthesise the extent of a body of literature on a particular topic (Khalil et al., 2015). The methodology focused on five phases of protocol and review development (Arksey and O’Malley, 2005; Khalil et al., 2015; Levac et al., 2010).

2.1. Research question

The research question asked by the scoping review was: ‘What are Chinese nurses’ experiences of migrating overseas?’

2.2. Identifying relevant studies

The procedure of identifying studies followed the three-step approach according to search strategies of JBI systematic reviews (Aromataris and Riitano, 2014). First, a simple search was conducted on 7th March 2016 in Scopus, PubMed and ProQuest, and titles and abstracts of retrieved records examined to determine alternative terms. A variety of relevant words (e.g. “immigrant”, “migrant”, “overseas”, “foreign”, “international”, “nurses” and “Chinese”) were then identified. Second, the main search commenced in March 2016 with thirteen databases: Scopus, PubMed, Informit, CINAHL plus, Ovid Medline, ProQuest health & medical complete, PsycINFO, Web of science core collection, ProQuest social science journals, Social services abstracts, Sociological abstract, International Bibliography of the Social Science, ProQuest Dissertations & Theses Global, and Google Scholar. Search terms included the words from the previous search and their variations and combinations. Specific search strings, refined in accordance with each database, were applied (Supplementary material 1: An example of specific search strings). No date limit was applied and the language was restricted to English. Thirdly, the reference lists and bibliographies of included articles and previous related literature reviews were hand-searched to identify additional studies. Searches were developed by the research team and performed by the first author.

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