



Original research

Effects of cultural education and cultural experiences on the cultural competence among undergraduate nursing students

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ABSTRACT

Because of globalization and growing immigrant populations, nursing students need to possess a high level of cultural competence to provide nursing care to patients from various cultural backgrounds. However, it has been reported that the current cultural education in nursing curriculums is not sufficient to improve students' cultural competence. Little is known about how nursing students' personal experiences of other cultures may impact their cultural competence. This study was conducted to identify the ways in which cultural education and personal experiences with other cultures affect nursing students' cultural competence. A questionnaire-based descriptive cross-sectional study was conducted with 236 Korean nursing students from four universities in South Korea. The explanatory power of cultural experiences and cultural education for nursing students' cultural competence was 8.1% and 7.1%, respectively. The present study revealed that the explanatory power of the variable for nursing students' cultural competence increased when cultural experiences were added to cultural education. Among cultural experiences, contact with people from other cultural areas influenced nursing students' cultural competence the most. Therefore, it is recommended to encourage nursing students to engage in extracurricular activities with people from other countries, adding this to organized lectures on cultural education.

1. Introduction

Multicultural trends have recently emerged as being of great social importance around the world. Along with the recent trend of globalization and increasing cultural exchanges among countries, East Asian societies like South Korea are rapidly becoming multicultural. After a society becomes multicultural, changes occur in the distribution of medical service users. This is a result of an increased number of foreign people visiting medical institutions. These visits often deal with problems arising from changes in the patients' living environments and the need for lifestyle adjustments; other problems concern industrial disasters, pregnancy and childbirth, children's health management, and disease (Ju et al., 2013).

Nurses, in particular, spend more time providing the nursing care than other healthcare providers. Because of this, the effects of growing cultural diversity and changes in healthcare delivery have established the critical need for a nursing curriculum that incorporates culturally competent nursing practices throughout the education system (Aponte, 2012; Cuellar et al., 2008). Cultural competence has gained recognition as a critical component that prepares nursing students to provide care to patients of various backgrounds (Lin et al., 2015).

2. Background/literature

The integration of cultural competence into nursing curriculums was proposed by the American Association of Colleges and Nursing in 2008 to provide nursing care for patients with diverse cultural backgrounds (American Association of Colleges of Nursing, 2008).

Since then, many education programs for cultural competency have been developed and implemented in nursing schools in the United States and other countries (Calvillo et al., 2009; Cuellar et al., 2008). Most studies (Allen et al., 2013; Caplan and Black, 2014; Noble et al., 2014) have suggested that cultural competence educational intervention improves the cultural competence of nursing students. However, Lin et al. (2015) reported that a cultural competence course increases the cultural competence of nursing students' temporary after the course, but this effectiveness of the education declines over time.

Although nursing education organizations have provided cultural competence educational courses in the past decade, one study (Von Ah and Cassara, 2013) determined that students in courses incorporating cultural competence did not feel confident in providing culturally competent care. Also, a recent meta-analysis study (Gallagher and Polanin, 2015) on educational interventions targeting cultural competence indicated that four studies showed a decrease in cultural

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competence after the intervention was done. Educational interventions or courses used to enhance cultural competence have been shown to have varying degrees of effectiveness. Several recent studies (Gallagher and Polanin, 2015; Lin et al., 2015; Von Ah and Cassara, 2013), agreed in general that the present curriculum is not sufficient and that more research on the topic is required in order to try to get methods to build cultural competence. Therefore, this present study was conducted to propose an effective strategy enabling nursing students' cultural competence to improve outside of their regular coursework.

Besides cultural education, previous studies (Bentley and Ellison, 2007; Koskinen et al., 2009) suggested that international learning experiences could enhance the cultural competence of nursing students. Nursing students who experienced a study abroad program developed an understanding and sensitivity to the host culture (Ruddock and Turner, 2007), and student exchange programs based abroad raised cultural awareness and attitudes, with emotional connections of openness and acceptance toward other cultures (Bohman and Borglin, 2014). However, these previous studies (Bohman and Borglin, 2014; Ruddock and Turner, 2007) were qualitative studies and did not objectively prove the effectiveness on cultural competence of nursing students' experiences in study abroad programs. Moreover, it is not feasible to have all students participate in international exchange or study abroad programs in order to enhance their cultural competence. Meanwhile, little is known about the effects of students' non-school based experiences in other cultures and how these may affect cultural competence. In addition, no research has studied how nursing students' cultural competence may be affected by cultural education and personal experiences of other cultures.

Accordingly, this study evaluated the effects of students' personal experiences in other cultures on cultural competence and identified the respective effects of nursing students' cultural education and personal experiences in other cultures on their cultural competence.

3. Research design

This was a quantitative research design study conducted with a cross-sectional survey. The survey questionnaire consisted of 38 questions concerning general characteristics (4), cultural experiences (6), cultural education (1), and cultural competence (27).

3.1. Sample

The participants of this study were selected through convenience sampling from nursing students attending four universities in the Seoul, Incheon, and Gyeonggi provinces. These regions are inhabited by 63.4% of the foreign-born population in Korea, and the sample included a similar percentage of students from the freshman, sophomore, junior, and senior grades. After estimating statistical power using the G* Power Program 3.1, the reported medium effect size was 0.10, the significance level was (α) 0.05, the power was 0.80, the number of predictors was 10, and the required sample size for multiple linear regression was 172. In consideration of response rate, 250 questionnaires were distributed.

3.2. Instrumentation

3.2.1. Demographic variables and experience in other cultures

The participants completed the following questions involving demographic characteristics: What is your gender, age, and grade? Are either of your parents of a foreign nationality? In addition, respondents' personal experiences in other cultures were surveyed with the following questions: Have you ever traveled to a foreign country? Have you ever lived in a foreign country for over six months? Have you ever participated in a program outside of the regular curriculum to learn a foreign language? Have you ever associated with people from a different cultural region? Do you have any relatives living in a foreign country? Do you have any friends or neighbors from another culture?

3.2.2. Cultural education

Cultural education was surveyed using the following question: Have you ever received cultural education during a course? If participants answered that they had completed one or more class session, they were considered to have received cultural education.

3.2.3. Cultural competence

Cultural competence was measured using the Cultural Competence Scale for Nursing Students, which has 27 questions and was developed by Han and Cho Chung (2015). This scale consists of five factors: cultural knowledge (9 items), cultural skills (6 items), cultural experience (4 items), cultural awareness (4 items), and cultural sensitivity (4 items). The reliability (Cronbach's α) of this scale was 0.91 in a previous study (Han and Cho Chung, 2015). Participants answered each item on a 5-point Likert scale that ranged from "not at all" (1) to "absolutely yes" (5); a higher score indicated higher cultural competence. Item scores were summed and averaged, ranging from 1 to 5. The reliability (Cronbach's α) of the scale was 0.92 in this study.

3.3. Procedure

The authors obtained the approval from the Institutional Review Board of our institution (No. 1044396-201501-HR-001-01). After obtaining the permission, the authors visited four universities between November and December 2015. The researcher explained that participation in the study was voluntary, that collected data would only be used for the study and would be processed anonymously, and that participants could withdraw their consent any time they wished. Participants who consented were given a questionnaire to answer. The participants' privacy was guaranteed, and a research assistant distributed and recovered the questionnaires to maintain confidentiality. A total of 250 questionnaires were distributed, of which 243 were recovered (97.2%); of those, 236 were adequately answered and considered valid.

4. Results/findings

The collected data were analyzed using SPSS WIN 21.0 (IBM, Armonk, NY). The participants' general characteristics, cultural experiences, cultural education, and cultural competence were analyzed through frequencies, percentages, means, and standard deviations. An independent *t*-test was used to examine the differences in cultural competence per participant characteristics. To identify how nursing students' cultural education and personal experiences in other cultures affect their cultural competence, a hierarchical regression (with a significance level of 0.05) was conducted using the enter method. The reliability of the cultural competence scale was assessed using Cronbach's α coefficient.

4.1. Sample

The participants' mean age was 21.42, and 79.7% were female. Of the participants, 24.6% were freshmen, 30.1% sophomores, 25.8% juniors, and 19.5% were seniors. None of the participants had a parent of a foreign nationality (Table 1).

4.2. Findings

Of the participants, 55.9% had experience in overseas travel, 16.9% had lived in a foreign country over six months, 63.1% had experience learning a foreign language through a program outside of the regular curriculum, and 43.2% had received some form of cultural education. In addition, 50.4% had associated with people from a different cultural region, 39.0% had a relative living in a foreign country, and 16.9% had friends or neighbors from a different culture. There was a significant difference in cultural competence with respect to cultural education

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