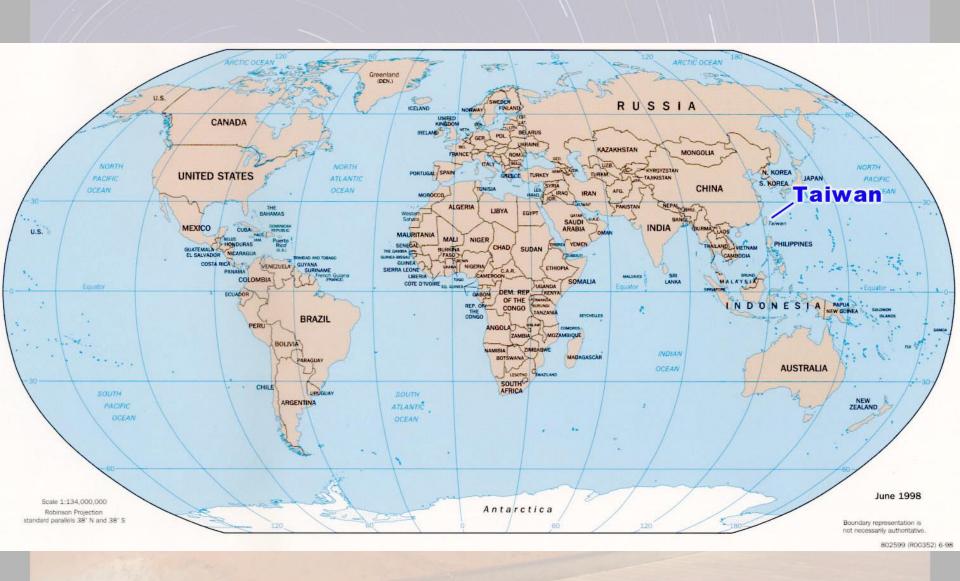
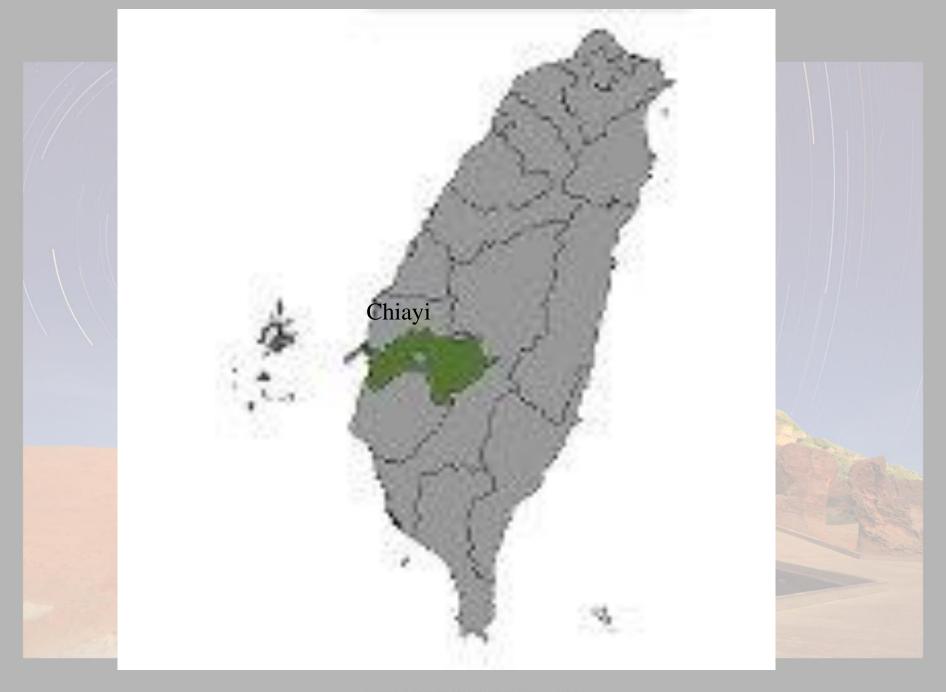
Equipping nursing students for cultural care

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Background

Equip cultural care competence for nurses under the diversity of the world is a global trend as well as in Taiwan.

In Taiwan, the number of immigrant wives (transnational marriage) has increased dramatically in recent years.

There are 163,060 immigrants from southeastern countries resident in Taiwan including Vietnam, Indonesia, Thailand, etc.

Taiwan is gradually shifted towards a more multiethnic society. And, this change should affect the content of nursing education.

Insufficient cultural care perception may obstruct student nurses to provide care for patients and their families in clinical practice.

purpose

The purpose of this study was to establish a culture care embedded in a nursing course and to explore its effectiveness as related to student nurses' culture care perception.

Literature

Cultural care competency is defined as 'the process in which the healthcare provider continuously strives to achieve the ability to work effectively within the cultural context of a client, individual, family or community (Campinha-Bacote, 2003; Leininger, 2002).

Campinha-Bacote(2003) argued that the key to cultural care competency is cultural desire, wanting to, rather than having to, learn and interact with other cultures.

Methods Design

This study employed a onegroup pre- and post-quasiexperimental design and used purposed sampling to recruit nursing students in a university.

Methods Design

A total of 150 nursing students took an 18-week, totally 36 hours, cultural care competence embedded in the Child and Adolescent Nursing course, which including variety teaching strategies including lectures, team based learning (TBL), and workshop discussions.

Intervention-Course Design

Researchers considered that nursing students should perceive culture care in nursing course.

Thus, we designed a teaching course that would encourage and enable students to perceive a culture care. With this knowledge and individual experience, they would be more able to assist patients and families in caring.

Course Design

The course included classroom lectures and writing assignments based on the individual culture care practice.

a culture assessment of child and adolescent families (3 h) child physical assessment (3 h)

The content of the classroom lectures

practical aspects of culture care for families and discussions including Vietnamese caregivers (2 h)

cultural care for children and adolescents (12 h)

Indonesia caregivers (1 h)

Thailand caregivers (1 h)

child's development and mental support in cultural care (8 h)

building a congruent culture care environment (4h)

a course evaluation (2h)

Course Design

The instructors wrote handouts for the students, which introduced the broad concept culture care for child and families and strategies of practicing culture care.

Teaching strategies included lectures, group discussion, demonstrations, experience sharing, and reviewing multimedia materials.

The course first taught how to perceive and practice a culture care for family-centered child and adolescent.

Course Design

Then, each student selected a case whose mothers were immigrants and created a care plan to attempt to providing congruent culture care, which was discussed with the instructor.



Students then carried out their plans and recorded their experiences of practice in their personal journals.



Students submitted written reports of their experiences, which included the plan for culture care.



The instructors commented on and corrected the students care plan.

Measurements

--socio-demographic questionnaires: gathered data on participant age, and sex.

--culture care perception.

Measurements

- --The culture care perception was developed by Liang(2014).
- -- The scale consists of 24 items scored on a 5-point Likert scale.
- --Scored was rated from 1 being strongly uncertain, and 5 being strongly certain.

Measurements

--The general scale of internal consistency of this scale is 0.90 with subscales (Culture care attitude, Culture care knowledge, and Culture care action) ranging from 0.72 to 0.88.

--Cultural care perception questionnaires with a 5-point Likert-type scale administered before and after the course to evaluate the effectiveness of the culture care perception.



Table 1 Overview of nursing student characteristics

N=138

nursing student characteristics	M±SD	N	0/0
Age (mean)	20.74±1.76	138	
sex			
male		4	2.9
female		133	96.4
religion			
Buddhism and Taoism & Folk Religion		59	42.7
Christianity & Catholicism		14	10.2
none		65	47.1

Table2 cultural care competency at pre and post test

	pre M±SD	post M±SD	Paired-t Test	
			t	p
Culture care attitude	42.77±4.87	43.62±3.85	2.01	.046
Culture care knowledge	29.70±4.46	31.51±3.87	4.40	<.001
Culture care action	25.13±3.13	25.99±2.44	3.06	.003
Total culture care competency	97.60±10.89	101.01±8.77	3.6	<.001

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1. Results showed that the average post-course score (101.01 ± 8.77) was significantly higher than the precourse score (97.60 ± 10.89) in cultural care perception.

- 2. the average post-course score (43.62±3.85) was significantly higher than the pre-course score (42.77±4.87) in cultural care attitude
- 3.the average post-course score (31.51 ± 3.87) was significantly higher than the pre-course score (29.70 ± 4.46) in cultural care knowledge.
- 4. the average post-course score (25.99±2.44) was significantly higher than the pre-course score (25.13±3.13) in cultural care action



Results of the study showed that a thorough nursing education program improve nursing students' culture care attitude, knowledge, action, and perception. The outcomes support the value of cultural care competence embedded in the nursing course programs, incorporating a multidisciplinary teaching strategies to help nursing students perceive adequate culture care for patients in clinical practice.

