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2018

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Student Nurses Perception of Ability to Provide Care Internationally

An Honors Thesis submitted in partial fulfillment of the requirements for Honors in the
School of Nursing

By

Cassie Williams

Under the mentorship of Sheri Carey, DNP, APRN, PCNS-BC

ABSTRACT

PUPOSE: With diversity expected to increase in the future, Bachelor of Science in Nursing (BSN) education regarding international nursing care and cultural competency was explored. Specifically, the purpose of this research was to determine whether current BSN students believe they are capable of providing appropriate care to international patients and/or patients of different cultural backgrounds.

METHODOLOGY: A mixed-methods survey was designed to assess student's perception of ability to care for and interact with international patients and patients of different cultural backgrounds. Additionally, it was assessed whether students believed more cultural education should be provided by the School of Nursing.

RESULTS: 53 BSN students were recruited to fill out the survey. The results indicated that about half of the nursing students felt prepared to provide care to international. Most of the participants indicated a need for additional cultural education to be provided by the School of Nursing.

CONCLUSION: From these results, it is evident that BSN programs should begin to incorporate more cultural and international nursing education. From the student's perspective, more preparation is desired before caring for patients of different cultural backgrounds. More research is needed to determine the most effective way to provide this education.

Thesis Mentor: _____

Dr. Sheri Carey

Honors Director: _____

Dr. Steven Engel

November 2019
School of Nursing
University Honors Program
Georgia Southern University

Acknowledgements

I would first like to thank the Georgia Southern University Honors Program for establishing such a rewarding undergraduate research opportunity. I am thankful for being able to explore my individual passions in nursing. Lastly, I am thankful for the opportunity to begin advocating for patients through my research.

Additionally, I would like to thank Georgia Southern University's School of Nursing. The mentorship I have experienced from the faculty and from my fellow classmates has been instrumental in shaping this research. I would especially like to thank Dr. Valerie Martinez and Dr. Sheri Carey for their one-on-one guidance and their persistent encouragement throughout this process.

Finally, I would like to thank my fellow Honor's students for persisting with me throughout the program. I would like to thank Rachel Brady for her constant help with my research from the perspective an honors nursing student. Last but certainly not least, I would like to thank Morgan Gallahue, Emilie Jones, and Grayson Walker for their support and constructive criticism throughout my research and college career.

Student Nurses Perception of Ability to Provide Care Internationally

Because of the nature of the world, it is essential for nurses to know how to provide compassionate care to all. Whether nurses are volunteering to provide care in other countries as part of a scheduled experience or in response to a natural disaster or epidemic, nurses need to be prepared to assist in care. In order to be prepared for any situation that arises, whether at home or abroad, nurses need to be able to care for patients of many different cultural and ethnic backgrounds.

International nursing has become a more prevalent topic in this day in time, because of the ‘global migration’ taking place. Because of their leadership in the clinical setting, nurse’s role internationally is essential in to providing the best care. Nurses are capable of autonomy and functioning independently through nurse run clinics, especially in international settings (Temido, Craveiro, & Dussault, 2015). From this, it is evident that independence and autonomy are leading virtues in the success of international nursing care. In fact, “In other regions, nurses have taken a leading role in this field and work independently in private or hospital-based clinics, occupational health departments and general practice” (Bauer, Hall, & Sato, 2013, p. 216). Nurses are at the forefront of international and multicultural care, in this regard.

Background

While nurses are important in the international setting, little research has been done on the impact student nurses have internationally. What little research has been done has focused on study abroad trips. Most of the research (Heuer & Bengiamin, 2001; Leinonen, 2006; Maten & Garcia-Maas, 2009; Sandra, Waldspurger, & Albin, 2004), concluded international experiences are beneficial for students. Not only do study abroad trips develop more culturally aware students, but international experiences enabled

students to apply textbook situations to clinical practice (Maten et al., 2009). Study abroad brought more awareness to the different cultural care required for international clients.

Study abroad is one of the most practical ways a student nurse can become acquainted with international care. Programs are created to give student nurses and nursing faculty opportunities to study abroad and immerse themselves into new cultures. Specifically, research has shown that study abroad opportunities have been shown to prepare students to care for international patients (Leh, Robb, & Albin, 2004). This is developing into a priority in the healthcare field, because of the United States of America becoming more multicultural and diverse.

The findings of previous research focused on the difficulties that nursing students faced while living in other countries. These experiences were often defined as “culture shock” (Heuer et al., 2001; Jenkins, Balneaves, & Lust, 2011). Specific culture shock patterns, were the lack of bathrooms and privacy in their homes, traveling difficulties, and language barriers with the patients and families they worked with. All of these factors contributed to the culture shock that the student nurses often experienced (Heuer et al., 2001, Jenkins et al., 2011).

Another theme prominent among the literature was the care the student nurses provided and how it compared with the care given in their country of origin (Leh et al., 2004). It was discovered that although languages and cultural customs may change nursing practice remains the same when you cross borders (Leh et al., 2004). In addition, there was a common theme in the desire to provide quality, efficient, cost effective care with the focus on health promotion and disease prevention among the students’ surveys

(Leh et al., 2004). Throughout the world, nurses have found that they are striving for the same things and battling the same problems.

In addition, Levi (2009) discussed the educational needs for student nurses prior to experience in international healthcare settings. Students need to be familiar with the culture before traveling and providing care abroad (Levi, 2009). This education should include not only language, but religions and specific cultural customs and practices. Student nurses must be willing to become culturally empathetic in order to provide competent care to international patients. In addition, students need to be aware that practices in the United States may not be accepted in other cultures (Levi, 2009).

In further research, it is suggested that increased cultural education while in school is just as effective as study abroad trips in regard to increasing cultural competence (Choi & Kim, 2018). However, personal experiences from travel and interactions with patients from different cultures are still considered valuable ways to acquire cultural competence. (Choi & Kim, 2018). Assessing cultural knowledge through a cultural competence scale, can be a valuable indicator of students' ability to provide competent cultural care (Choi & Kim, 2018). Furthermore, it was shown that after nurses received cultural education they had a desire to further increase cultural knowledge, specifically in matters of cultural traditions, health and spiritual practices. (Aboshaiqah, Tumala, Inocian, Almutairi, & Atallah, 2017).

Significance

Because of the expected increase in diversity in the United States (U.S. Census Bureau 2018), future nurses need to be better educated regarding variations in cultural practices. Additionally, cultural diversity is rising in many other societies due to various

factors, including migration (Aboshaiqah et al., 2017). Being culturally competent leads to a higher quality of patient centered care and can protect the safety of the patient. (Aboshaiqah et al., 2017). Because of the increasing diversity, it is valuable to encourage further cultural training. It is recognized that nursing programs should adjust curriculum to fit this need. In fact, it was recommended by that baccalaureate of science nursing programs begin to incorporate cultural education (American Association of College of Nursing, 2008). Increasing education on different cultures will benefit the nursing community and most importantly lead to enhanced patient-centered care.

Purpose

The purpose of this research was to explore the relationship between nursing students and international care and cultural competency. The research looked at whether students are interested in international nursing care and whether they feel competent to provide this care. The study explored whether student nurses feel as though they need more education in caring for multicultural and international patients.

More specifically, this study explored whether Bachelor of Nursing Science (BSN) students at Georgia Southern University feel prepared to provide care in an international setting and to culturally diverse patients. Primarily, the research focused on perceived educational and training needs of the students, perceived comfort level of the student nurse providing care, and perceived stress level of providing care internationally.

Hypothesis and Research Questions

Nursing students are not adequately prepared to perform skills and therapeutically communicate with patients from different cultural backgrounds and in international settings. Additionally, nursing students feel anxious with the idea of providing nursing related care internationally. From this hypothesis research revolved, around whether

nursing students feel capable to provide care to international patients. The comfort level of nursing students and the communication barriers they faced were addressed.

Specifically: 1) Are BSN students comfortable with initiating care in a country other than their own? 2) Are BSN students prepared to interact and communicate with a patient from a different culture or when a language barrier 3) Do BSN students lack structured education related to international care?

Methodologies

Sample

A sample of 53 students were recruited via email to participate in the research. Research was voluntary with no incentives provided. Inclusion criteria included the individual being at least eighteen years old and currently enrolled in the BSN program at Georgia Southern University. Students from both the Armstrong campus and the Statesboro campus were recruited.

Measurement

A mixed-method survey to explore the perception of BSN students at Georgia Southern University concerning their ability to provide care internationally was developed. The survey was distributed to students by nursing faculty via university email, per request of the research team. The survey focused on student's personal beliefs and preferences regarding international care. Questions included multiple choice, multiple response, free answer, and Likert-scale questions. In total there were eleven questions. Data was analyzed through the Qualtrics analysis system. The full survey tool used can be seen in Appendix A.

Data Analysis and Results

The data included 53 completed surveys. Analysis of this data was completed using the Qualtrics system. The survey's free response data was analyzed for themes in participant's responses.

Demographics

Most of the participants were in their fourth and final semester of nursing school. Students in their first semester of nursing school were the least likely to complete the survey. The full distribution can be seen in Figure 1 located in Appendix B. This was the only demographic data collected.

Culture

More students stated that they felt comfortable providing care to patients of different cultural backgrounds than those who reported they were not comfortable with the idea of providing care to patients from a different cultural background. This data is represented in Figure 2 located in Appendix B. When asked to rate cultural knowledge as either having no, some, average, above average, or expert knowledge, no one rated themselves as having no cultural knowledge or expert knowledge. Almost 22% of participants, reported having some cultural knowledge. Out of all the participants, 55% reported having average cultural knowledge and 23% of the participants reported having above average cultural knowledge.

International Nursing

The students were asked whether they felt prepared or equipped to provide care in an international setting and only 25% of the student population reported feeling confident with the idea of international nursing care. In accordance with this, 49% of the participants reported they were neither comfortable or uncomfortable, somewhat

uncomfortable or very uncomfortable with caring for international patients. The remaining 51% of students reported feeling comfortable or very comfortable providing care to international patients.

In addition, when asked about specific personal challenges one may face when in an international setting, most of the students, 91%, reported they feared language barriers specifically. Few participants, 8%, feared personal cultural conflicts, 30% reported lack of therapeutic communication skills could affect care, and 43% reported that their lack of cultural knowledge may be difficult to overcome.

Education

When asked whether the nursing program provides adequate education regarding international nursing and cultural care, nearly half of the students (47%) reported they thought the school provided enough cultural education. Out of all of the participants, 28% of the students reported uncertainty of whether there was enough education provided. Furthermore, 23% of the students reported that the nursing program did not provide enough education.

Additionally, 78% percent of participants felt as though the school of nursing should provide more education regarding both multi-cultural care and international care. The remaining students were divided between considering more and not needing more education. This data is represented in Figure 3 located in Appendix B. In accordance with this, 49% of participants stated they would definitely participate in a one-to-three credit hour elective course regarding multicultural and international care and 37% of participants indicated they would consider taking an additional class while 13% of the participants reported they would not be willing to take an additional class. This data is reflected in Figure 4 located in appendix B.

Implications

From the results displayed in figure 2, it is evident that a large proportion of nursing students do not feel comfortable with initiating care in an international setting. Students specifically reported that the idea of facing language barriers was overwhelming. As shown in Figure 3, BSN students believe that the School of Nursing should provide further education regarding international and cultural appropriate patient care. In accordance with this, when prompted by a free response one student stated: “The nursing program does include areas of cultural competence training, but it is very concentrated on the 'surface' knowledge of those cultures. Therefore, I feel that we have a very simplistic knowledge base for caring for international patients that focuses primarily on acquiring translators and recognizing the religion of the international patient.” This idea of “surface-level” or non-specific education was mentioned in several (15 of the 42) free responses.

Furthermore, from these results it is evident that students at this particular university indicated that although they feel comfortable providing care to patients of different cultural backgrounds, students believe further education should be provided. Additionally, more students were uncomfortable with the idea of international nursing care specifically. Students indicated they did not know how to overcome language barriers when providing care. A remarkable percentage of the students surveyed indicated that they believed that additional opportunities for multicultural and international nursing care should be provided by the university.

Based on the results of this study and from the American Association of Colleges of Nursing, recommendation, it would be beneficial to develop a curriculum that specifically focuses on cultural and international nursing. Potentially, an elective one-to-

three credit hour class could be developed. Out of all the participants, 86 % of the students surveyed did report potentially willing or willing to take an additional class in order to advance their cultural competence. From this it can be inferred, that nursing students do see the benefit in gaining more education related to cultural competence.

Recommendations

Recommendations would include expanding the study to include multiple college campuses across the state and/or across the country. Replicating the study could potentially reap benefits in knowing whether this is a nursing concern. Additionally, further assessing the type of cultural education received at different levels of nursing education would be valuable. Exploring the benefits of international study abroad trips compared with an educational based program would be necessary in developing an adequate program to ensure student success.

Additionally, it would be beneficial to assess the cultural knowledge students possess versus the student's perception of cultural competency and perceived comfort level of providing care that the students reported. While evaluating the perception of capabilities with interacting with patients of different cultural backgrounds is valuable, additional research indicated using a cultural competence scales to assess actual cultural knowledge is a valuable indicator of cultural competency (Choi & Kim, 2018). Further research is needed to determine whether students lack cultural knowledge or whether students just perceive lacking inexperience or knowledge.

Conclusion

Because of the increased recognition of diversity in this country, it is recommended that nursing programs begin to incorporate the care of international patients and further education to ensure cultural competence. This study aimed to see

whether nursing students believe their current education is providing effective cultural education. Perceived comfort levels of providing care to patients of different cultural backgrounds were discovered to be relatively high. However, the idea of providing nursing care internationally, seems to be out of the comfort zone of many student nurses. Improving the confidence in student nurses, is preparing the future nursing workforce. Providing additional cultural and international nursing education, will benefit our students and furthermore benefit future patients.

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Appendix A

Q1 What semester are you classified as?

J1 (1)

J2 (2)

S1 (3)

S2 (4)

Q9 At your current knowledge level: Do you feel prepared to provide care to a patient in an international setting?

Yes (1)

Maybe (2)

No (3)

Q10 At your current knowledge level: Do you feel prepared to provide care to a patient from a different cultural background than you?

Yes (1)

Maybe (2)

No (3)

Q2 Rate your overall cultural understanding/knowledge on a scale of 1-5.

	No Knowledge (1)	Some Knowledge (2)	Average Knowledge (3)	Above Average Knowledge (4)	Expert Knowledge (5)
Click to write Statement 1 (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q3 Rate your perceived comfort for providing care to international patients on a scale of 1-5.

	Really Uncomfortable (1)	Uncomfortable (2)	Somewhat comfortable (3)	Comfortable (4)	Really comfortable (5)
Click to write Statement 1 (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q4 If you were to provide care internationally, what personal challenges would you expect to face. Select all that apply.

- Personal Cultural Conflicts (1)
 - Lack of therapeutic communication skills (2)
 - Language barriers (3)
 - Lack of cultural knowledge (4)
-

Q5 Do you think your nursing program adequately prepares it's students for providing care to patient's internationally?

- Definitely yes (1)
 - Probably yes (2)
 - Might or might not (3)
 - Probably not (4)
 - Definitely not (5)
-

Q6 Please explain the rationale for your answer for the previous question below:

Q7 Do you think that the Georgia Southern Nursing program should provide education regarding caring for patient's internationally and/or provide more multicultural education?

- Yes (1)
- Maybe (2)
- No (3)

Q8 Would you be willing to take a 1-3 credit hour elective class in order to gain more knowledge regarding international and/or multicultural nursing care?

- Yes (1)
- Maybe (2)
- No (3)

Appendix B

Figure 1

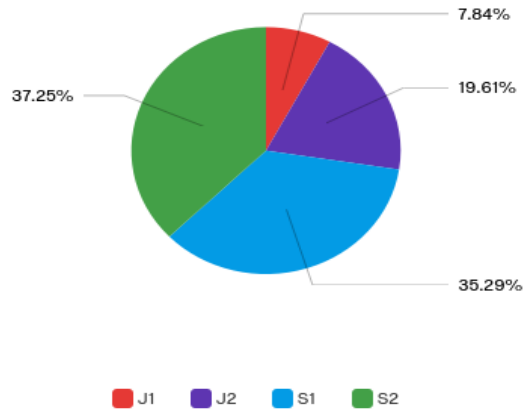


Figure 1. The breakdown of the nursing school semester of the participants. J1 = Junior 1 semester or first semester of nursing school. J2 = Junior 2 semester or second semester of nursing school. S1 = Senior 1 semester or third semester of nursing school. S2 = Senior 2 or fourth and last semester of nursing school.

Figure 2

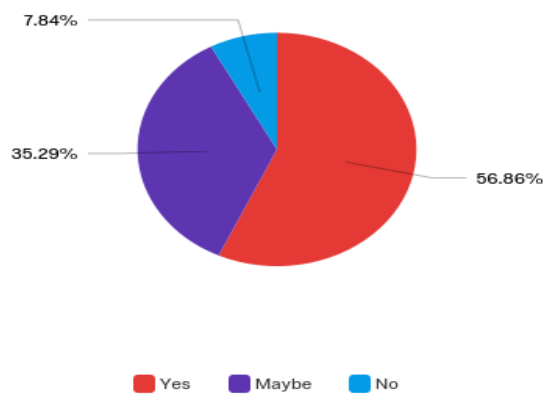


Figure 2. Students reported comfort level providing care to patients of different cultural backgrounds. Yes= Students felt prepared to provide care to these patients. Maybe= Students were unsure if they were prepared to provide care to these patients. No= Students did not feel prepared to provide care to these patients.

Figure 3

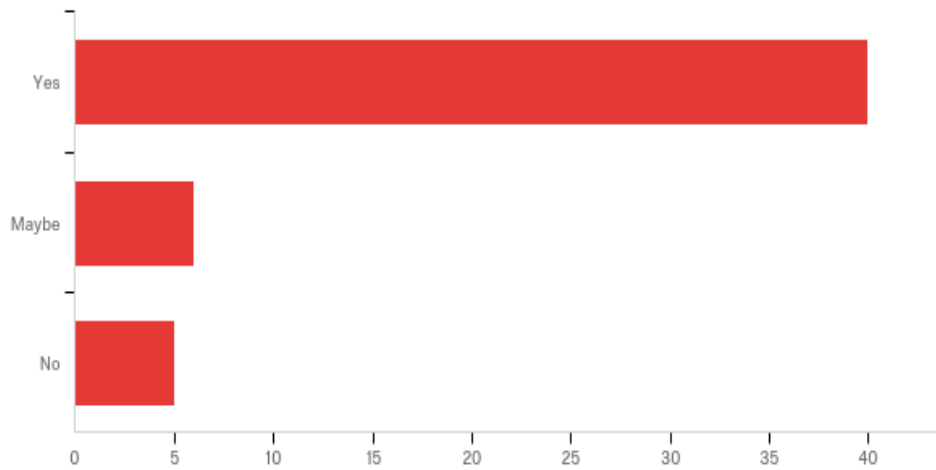


Figure 3: Students report on need for further international nursing and cultural education. Yes=Students reporting they want more education. Maybe= Students are unsure about wanting more international nursing and cultural care education. No= Students do not think more education is needed.

Figure 4

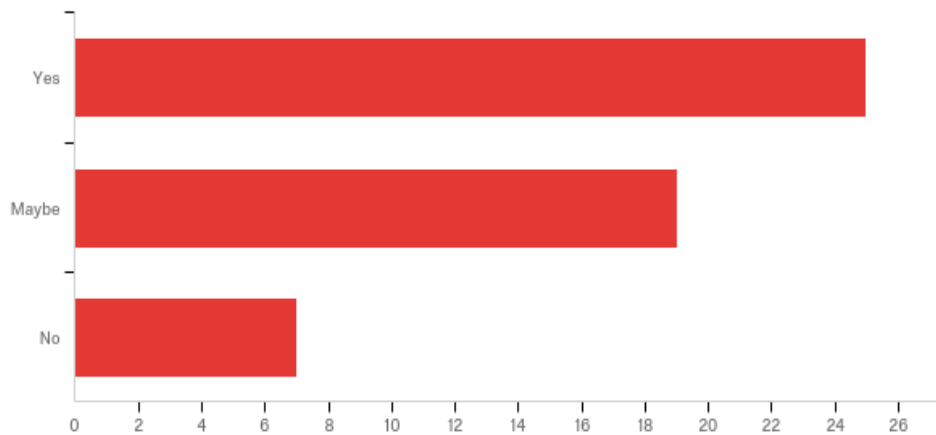


Figure 4: Representation of Students who are willing to take an elective three credit hour course over international nursing and cultural education. Yes= Students would be willing to take an elective course. Maybe=Students would consider taking an elective course. No=Students would not be willing to take an elective course.