

Educating Nursing Students About Cultural Competence

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Background and Purpose

Health disparities persist among minorities, multi-cultural, and vulnerable populations. Lack of training in self-awareness and humility of one's culture, and sensitivity of other cultures negatively impact patient safety and health outcomes. A review of the literature was performed finding many diverse approaches to teaching/learning about culture exist. However, some approaches may oversimplify cultural differences, leading to stereotyping. The purpose of this project was to improve future nurses cultural competence using active-learning strategies to address biases and stereotypes, and increase cultural self-awareness and humility, and cultural sensitivity among nursing students.

Design and Implementation

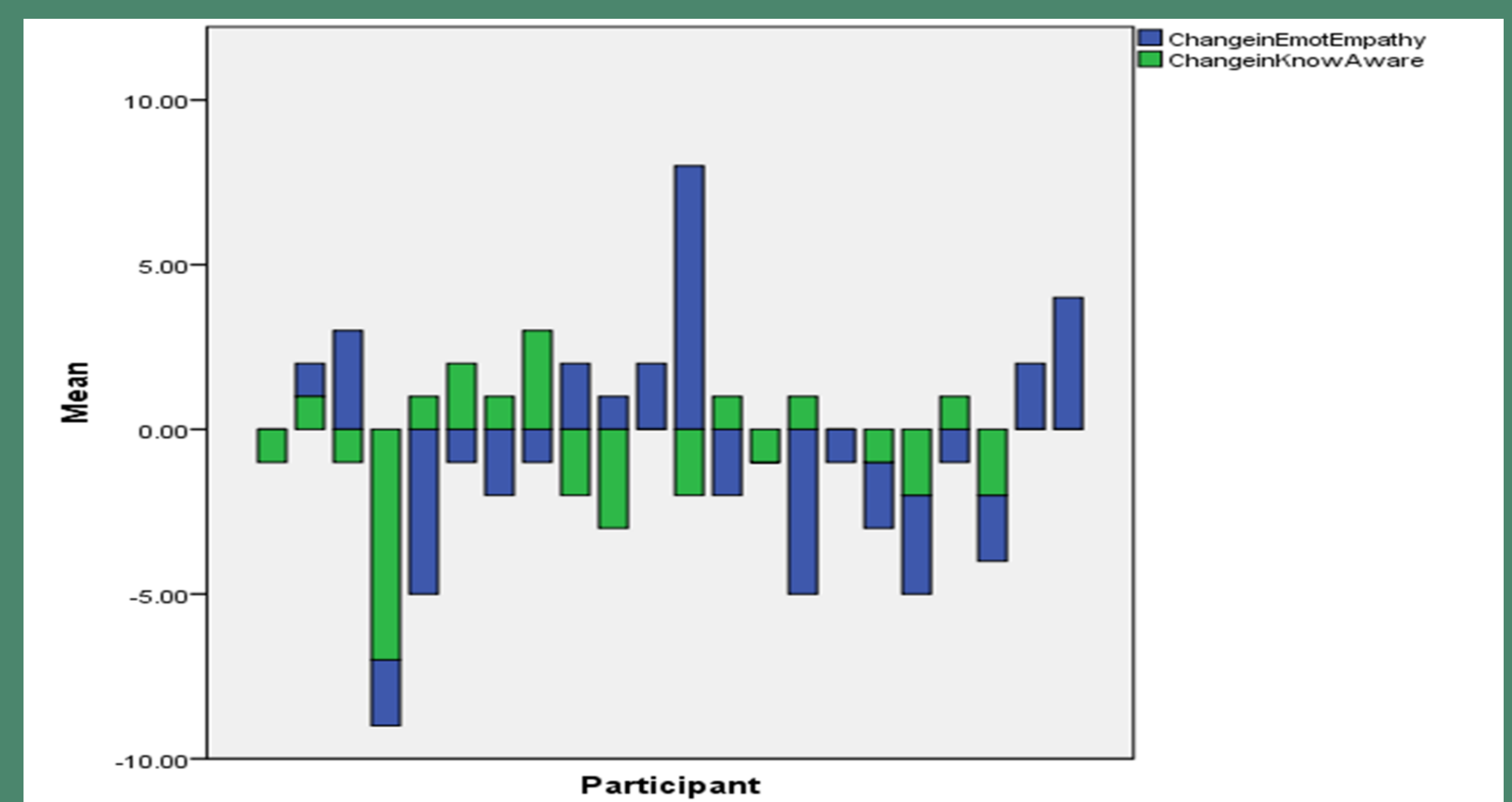
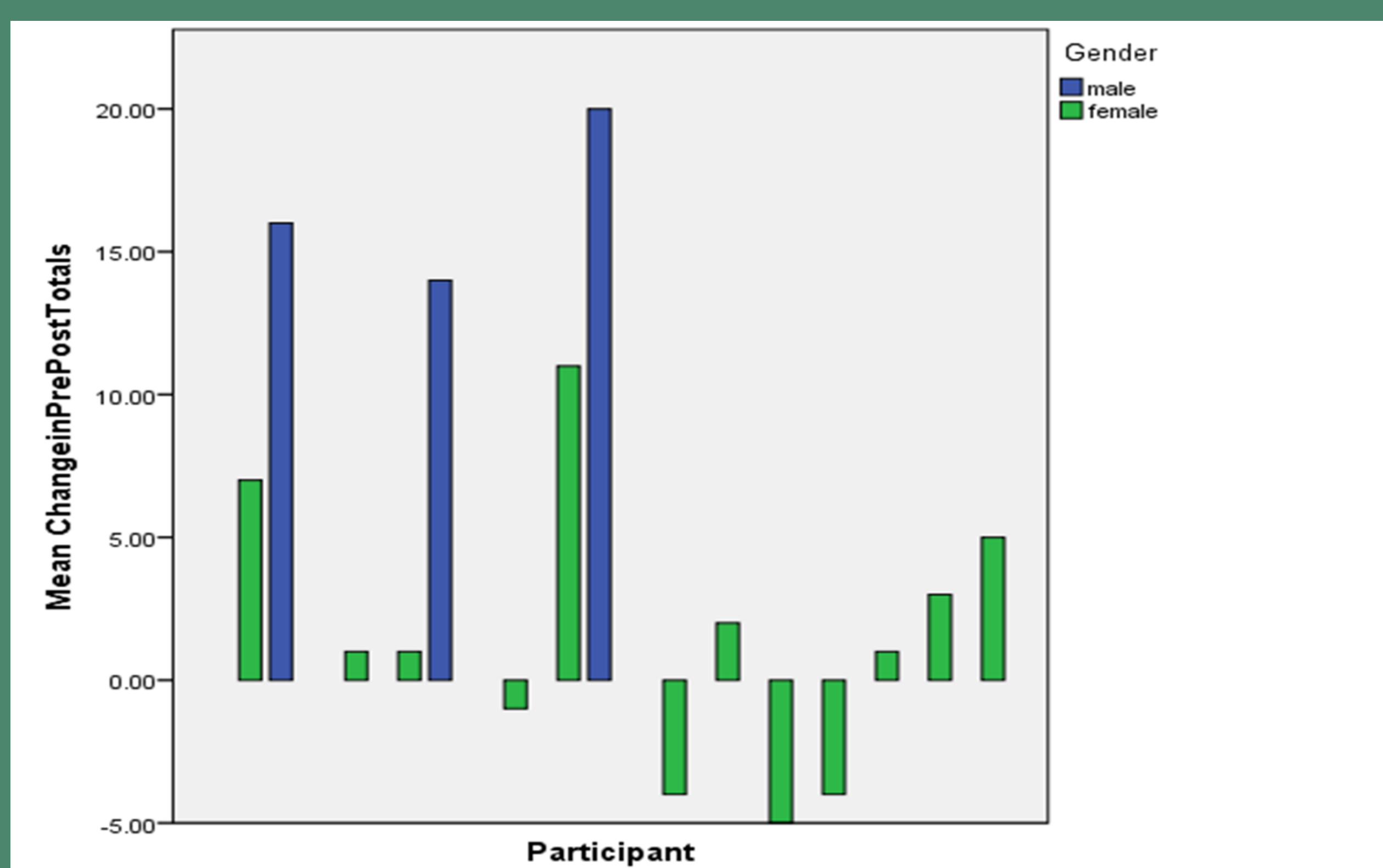
This quasi-experimental, quantitative comparison pilot project studied a non-probability, purposive, accessible, convenience sample of 22 BSN students enrolled in a Health Assessment course at a Christian university in the Midwest. A pre-self-report assessment (Cross Cultural Competence Instrument for Healthcare Providers (CCCHP-27) was completed by all participants. Dimensions of motivational/curiosity, attitudes, skills, emotions/empathy, knowledge/awareness, and social desirability were measured. Four lessons using active-learning interventions were implemented over a four-week period. These included a stereotyping/bias activity, an implicit bias activity, completion of a cultural self-reflection and genogram, a common and different activity, self- and others-awareness activity, culminating with a cultural pain assessment simulation and role play. Each activity was followed with reflective journaling. A post-self-report CCCHP-27 assessment was completed.

Theoretical Framework

The Intersectionality Framework by Crenshaw, (1989), using multiple social locations and marginalized identities can elevate or oppress by power differences, and structural inequities.

Results

Although not statistically significant, the (mean) change in *attitudes, motivation, curiosity, and skills* increased or improved. All males and most females showed increases (improvement) of the total mean on scores, indicating an overall increase in self-assessment of cultural competence (graph 1, each bar indicates a unique participant, male=blue, female=green). Surprisingly, *empathy, emotions, awareness, knowledge* slightly decreased from baseline for many of the participants (graph 2). Any change, however small, leads further down the path of cultural competence.



Conclusions and Implications

Provide frequent, experiential, innovative, active-learning, specifically role-play, simulation, and reflective journaling to help increase cultural competence which is an ongoing, dynamic process. Limitations: Small sample size, time constraints, homogeneity, of age, race, ethnicity of participants. Strengths: Social desirability questions in CCCHP-27

References

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3. Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: a black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics. *University of Chicago Legal Forum*. 1989, (1), 130-167.