Title:
Influence of International Service Learning on Cultural Competence

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SESSION: RISING STARS OF RESEARCH AND SCHOLARSHIP INVITED STUDENT POSTERS

Session Title:
Rising Stars of Research and Scholarship Invited Student Posters

Slot:
RS PST1: Sunday, 17 November 2019: 11:45 AM-12:15 PM

Applicable Category:
Clinical, Academic, Students, Leaders, Researchers

Keywords:
cultural competence, global nursing and service learning

References:


**Abstract Summary:**

Knowing how best to teach nurses to become culturally competent is an important topic. This study examined the influence of international service learning on nursing students and nurses & its impact towards developing cultural competence. Does traveling and serving in another country really help nurses become more culturally competent?

**Content Outline:**

**Research Description:** Mixed-method qualitative-quantitative study comparing the influence of an international service learning volunteer medical mission experience on nursing students. Pre and post scores were measured on their cultural competency knowledge and confidence scores. A control group of nursing students working with a diverse population was used and compared with personal journals and standardized quantitative test.
Overall Research Question:

How do we teach nursing students and nurses to provide effective care for our diverse population?

The use of international service learning needs more research to measure its effectiveness as a possible strategy to teach cultural competence to nursing students and nurses.

Research Questions:

1. How does service learning in an international country effect self-efficacy toward the development of cultural competence in undergraduate nursing students?
2. How do nursing students value a medical international service learning experience towards gaining skills in cultural competence?
3. How do nursing students in different semesters compare between each other in self-efficacy in developing cultural competence?
4. Is there a difference in self-efficacy among nursing students towards cultural competence who have had prior language or international travel experience?
5. How does the control group compare in self-efficacy towards cultural competence compared to the intervention group?

Purposes of Study:

1. Compare and contrast the most commonly used teaching strategies for cultural competence training in undergraduate nursing programs.
2. Create an original qualitative and quantitative intervention study of a two-week immersion medical experience with nursing students.
3. Collect and analyze empirical data and phenomenological themes to measure international service learning as an effective teaching strategy for cultural competence training.

Objectives of Study

1. Measure the cultural competence and self-efficacy level of nursing students in the pre-intervention experience phase.
2. Compare pre-intervention scores to the post-intervention scores.
3. Evaluate the effectiveness of an international service learning experience as a teaching strategy in strengthening self-efficacy towards developing cultural competence.
4. Identify the phenomenological themes of students and nurses in an international service learning medical experience.

Compare the intervention group with a control group of nursing students.
Methodology:

- This original descriptive qualitative and quantitative study used the intervention of a two-week international immersion medical service experience for undergraduate nursing students and new graduate RNs to evaluate the teaching strategy of international service learning towards cultural competence.

- The study was quasi-experimental involving the comparison of two groups: one, which received the intervention of international service learning, and the second served as a control group, which served in a local US hospital without additional training in cultural competence.

Study Population:

36 Nursing students from CSN in LV, NV.

Control group: 18 (in last semester of nursing school) randomly assigned to instructor. 11 completed surveys and journals. Students worked 2 weeks in acute hospital clinical with RN preceptor in local LV hospital.

Intervention group: 18 (in all semesters of nursing school). 16 completed surveys and journals. Worked 2 weeks in Belize serving in medical clinics and rural communities.

Findings:

- This research found that a two-week medical service learning experience in Belize significantly improved self-efficacy, self-confidence, skills and self-awareness among nursing students and new RN graduates by working with the Hispanic population and developing cultural competence.

- Both qualitative and quantitative results showed statistically significant improvement in post-survey scores for the intervention group.

- The quality and personal impact of the journals in the international group was much richer than the student nurses who served in their own community.

Conclusions:

- The nursing profession needs to agree on a definition of cultural competence and how to train both students and educators.

- Nurse educators need to measure the effectiveness of teaching strategies for required topics in their curriculum.

- Reliable and valid instruments & rubrics need to be created to better compare and contrast teaching methodologies in nursing education.

- Nurse educators and students need to be aware of the positive impact of international service learning on self-efficacy towards cultural competence.

- Funding resources need to be identified to allow this opportunity for more nursing students, or to create similar experiences in their local community with diverse populations.
Implications for Nurse Educators:

- Awareness & training is needed for nurse educators to:
  - Work towards cultural competence themselves.
  - Be aware of the literature and research on this topic.
  - Acknowledge international service learning as an effective training strategy.
  - Promote opportunities for students to serve internationally.
  - Collaborate with their communities to create clinical opportunities with more diversity.
  - Collect and share resources for students seeking this learning experience.

Implications for Nurses:

- All nurses need additional training in cultural competence to help decrease ethnic disparities and to increase quality nursing care by effectively meeting the unique needs of our growing diverse population.
- Graduated nurses can also take advantage of international service learning experiences traveling with companies who take groups internationally to serve in areas around the world.

Reflections:

- As a nurse educator, more can be done to improve cultural competence training during nursing school.
- Student nurses generally may not graduate as “culturally competent,” as it is a process and they will move from novice to expert; however current training is lacking in effectiveness.
- Global nursing and international service learning offers additional skills and insights that could never be taught in textbooks!

Topic Selection:

Rising Stars of Research and Scholarship Invited Student Posters (25201)

Abstract Text:

Multiple curricular approaches are being used to teach cultural competency to nursing students in the United States in accordance with accrediting board standards. As nurse educators are searching for evidence based teaching practices, this article reviews the most commonly current teaching methods being used. Although a variety of methods are being implemented, little empirical evidence exists to suggest any one methodology for teaching cultural competency for nursing students produces significantly better outcomes. The use of clinical experiences, standardized patients and immersion experiences have produced the most favorable results which increase student awareness, knowledge and confidence in working with ethnically diverse patients.

For decades, experts have documented racial and ethnic disparities in health care and acknowledged the complex and contributing factors to substandard healthcare for ethnic minorities. (Betancourt, 2003;
Rust et al., 2006; Institute of Medicine, 2002). Poor patient outcomes occur when there is a lack of culturally competent care from the health care provider (Institute of Medicine, 2002; Smedley, 2003). Language barriers, food preferences, cultural beliefs that impact healthcare practices, and physical variations among ethnic groups which may alter pharmacological effects, all impact the quality of care provided.

The additional problem is that nurses who are not well trained to be culturally competent often do not correctly or adequately address the unique needs and preferences of ethnic minorities. If a nurse is untrained in assessing, evaluating and adjusting care plans to meet these unique needs, nursing care and treatment may be compromised. Many nurses state they feel inadequate and uncomfortable in providing culturally appropriate and sensitive care to clients of an ethnicity different from their own, which may compound the problem of disparate care for minorities (McHenry, 2007). Research findings report that students graduating from baccalaureate programs do not feel prepared to work in a multicultural society (Bernal & Froman, 1987; Coffman, Shellman and Bernal (2004); Kulwicki & Boloink, 1996; Bond, Kardong-Edgren, & Jones 2001).