

MEASURING CULTURAL COMPETENCY: ONE-YEAR POST IMMERSION EXPERIENCE IN COSTA RICA

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DISCLOSURE SLIDE

LEARNING OBJECTIVES

1. The learner will be able to discuss study abroad immersion courses as one method of developing cultural competent nurses among diverse populations
2. The learner will be able to identify cultural competency research outcomes comparing one-year post experience compared to immediate post experience of baccalaureate nursing student.

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No conflict of interest

Background

- ✧ Nursing education programs should include cultural aspects of delivery of care due to the ethnic diversity of our patient populations as dictated by IOM report (2010).
- ✧ Educators are challenged to provide opportunities for our students to prepare them to develop cultural competency skills in the curriculum (Fitzpatrick, 2007).
- ✧ National League of Nurses and the Commission on Collegiate Nursing Education both accrediting agencies for schools of nursing require the curriculum to include elements of cultural competency (National League for Nursing Accreditation Commission, 2008 & American Association of Colleges of Nursing, 2008).

Definition Cultural Competency

- ✧ Cultural competency is: "The process in which the health care professional continually strives to achieve the ability and availability to effectively work within the cultural context of a client (family, individual or community)" (Campinha-Bacote, 2002, p.181).
- ✧ Cultural competency refers to the awareness of clients' unique population characteristics (O' Brien et al, 2006).
- ✧ Importance of cultural competence involves an understanding of cultural and social influences of clients' health behaviors (Betancourt et al, 2003).

Course: On site in Costa Rica

- ✧ Elective 1-credit global experience course was developed for undergraduate baccalaureate nursing students
- ✧ Pre-requisites were successful completion of Fundamental and Health Assessment nursing courses.
- ✧ Purpose of this course was to explore the culture, socio-economic, and healthcare policies of the Costa Rica through the experiential process in this country partnering with local school and or community clinics and hospital visits.

Course Objectives

- ✧ Discuss the interplay among culture, socio-economic issues and healthcare as observed during the student experience in Costa Rica.
- ✧ Identify ways in which his/ her awareness of social responsibilities has increased.
- ✧ Describe specific team member skills that are important in the context of this global experience.
- ✧ Describe the impact of this service-based experience on their personal and professional growth.

Costa Rica Experience

- ✧ Clinica Biblica/EBAIS
- ✧ Elementary School
- ✧ Outpatient clinic hospital visit
- ✧ Nursing assessments in the community
- ✧ Local clinic in La Carpio/ Pharmacy
- ✧ Mision Consuelo – Hospice Program home visits
- ✧ BRI BRI program – medicine man/herbal medications

Research

- ✧ Purpose of this descriptive quantitative study was to compare the effects of a study abroad program post experience to improve the cultural competence of baccalaureate nursing students experience course with one-year post Costa Rica experience
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- ✧ Method was structured post Likert questionnaire scale of Inventory for Assessing the Process of Cultural Competency among Healthcare Professionals-Revised (IAPCC-R), (Campinha-Bacote, 2012) was utilized.
- ✧ Instruments were distributed in a class of undergraduate baccalaureate nursing students 1 month post the volunteer Costa Rica experience and one-year post immersion course.

Ethical Considerations

- ✧ IRB of Adelphi University received exempt status
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- ✧ Information sheet & consent forms given to subjects
- ✧ Confidentiality was maintained by numerical coding of data; responses could not be linked to any individual.
- ✧ Data & consents were stored in a locked cabinet .

Setting and Participants

- ✧ Convenient sample of undergraduate baccalaureate nursing students
- ✧ Setting suburban Northeastern United States in private university
- ✧ Registered and attended the 1 credit elective course , On Site in Costa Rica: Spring Break

Instrument

- ✧ Inventory for Assessing the Process of Cultural Competency among Healthcare Professionals-Revised (IAPCC-R), (Campinha-Bacote, 2012).
- ✧ Pencil and paper self-assessment tool of a 4-point Likert scale, which includes 25 questions. The process was 20 minutes in class post experience in Costa Rica and one-year post course via mail.
- ✧ Instrument scores range from:
 - Cultural proficiency 91-100,
 - Cultural competent 75-90,
 - Culturally aware 51-74
 - Culturally incompetent 50-25(Campinha-Bacote, 2002).

Demographics Data Collection

One year Post Immersion Course

- ✧ Age range of subjects: 21-41
- ✧ Gender predominately female at 93.3%
- ✧ Race was N= 2, (13.3%); African American, N= 1 (6.6%); Asian, N=1, (6.6%); Hispanic/Latino, N=8, (53.3%); White and N= 3, (20%). Other
- .
- ✧ Subjects were eligible to participate in this study that attended in the immersion course in Costa Rica 2012.
- ✧ Subjects fluent in Spanish were N=2 (13.2%).

Instrument Statistics

- ✧ Strongly agree, very knowledgeable, very aware, very involved and very comfortable were coded as 4.
- ✧ Agree, knowledgeable, aware, involved and comfortable were coded as 3.
- ✧ Disagree, somewhat knowledgeable, somewhat aware, somewhat involved and somewhat comfortable were coded as 2 .
- ✧ Strongly disagree, not knowledgeable, not involved and not comfortable were coded as 1 .

Results

- ✧ Scores compared for post questions 1-25 of the 18 subjects one-month post and 15 subjects one-year post experience.
- ✧ Post experience the scores were recorded in 2012 as 0 subjects scored in the culturally incompetent level, 4 (22.3%) subjects were culturally aware, 14 (77.7%) subjects were culturally competent and 0 subjects scored culturally proficient.
- ✧ One-year post experience scores were recorded in 2013 as 0 subjects scored in the culturally incompetent level, 4 (26.7%) subjects were culturally aware, 9 (60%) subjects were culturally competent and 2 (13.3%) subjects scored culturally proficient.

Quantitative Results Compared

- ✧ The culturally proficient scores included an increase of two subjects one year post experience that were not evident in the initial post one month immersion course. Culturally competent scores revealed a decrease in the percentage after one year. Culturally aware scores post experience of one year had an increase of 4.4%
- ✧ The two groups were compared of initial post one month and one year post Costa Rica experience based on T-Test sum of scores. Participants at post one month N=18 had a mean = 78.83 and SD = 6.8. Participants post one year N=15 had a mean of 78.80 and a SD=9.2. Thus no significance was evident between the groups. Scores were maintained.

Table 1. Cultural Competency Scores

Categories	Scores	2012 N=18	% 2012	2013 N=15	% 2013
Culturally proficient	91-100	0	0	2	13.3%
Culturally competent	75-90	14	77.7%	9	60%
Culturally aware	51-74	4	22.3%	4	26.7%
Culturally Incompetent	50--0	0	0	0	0

Limitations of Study

- ✧ Small sample size of 18 compared to 15 subjects
- ✧ One location
- ✧ Short duration (1 week study abroad)
- ✧ One class of undergraduate baccalaureate nursing students attending the Costa Rica experience
- ✧ Instrument: Presently available in a student version

Implications for Education

- ✧ Cultural awareness
- ✧ Cultural responsibility
- ✧ Self-reflection
- ✧ Shrinking world
- ✧ Taking accountability
- ✧ Integration of clinical skills using cultural competency

Conclusions

- ✧ Continue with the vision of service based learning
- ✧ Implications for future research
- ✧ Reflective learning
- ✧ Lessons learned
- ✧ Expanding the program
- ✧ Encouraging practicing RN's to service based learning
- ✧ Responsibility of the nurse educator – cultural competency

Thank You

QUESTIONS??????

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