

Factors that Influence the Development of Cultural Competence in Undergraduate Nursing Students

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Introduction

As the US demographic patterns have shifted toward increasing diversity, it is imperative that health care providers be well prepared to provide culturally competent care to the patients.

A considerable knowledge gap regarding how nursing students enact the concept of culturally competent care and the ability to envision effective ways of tailoring nursing education to integrate culture learning into curriculum still remain a challenge.

The purposes of this study were to assess the cultural competence level and to identify the essential factors that influence the development of cultural competence in undergraduate nursing students.

Methods

This exploratory and predictive quantitative study recruited 106 undergraduate nursing students from a university by sending 200 email invitation letters to all ASN and BSN nursing students for participation.

The IAPCC-SV[®] tool developed in 2007 by Campinha-Bacote based on *the Process of Cultural Competence in the Delivery of Healthcare Services Model* was used to collect the data of the level of cultural competence including the five subscales of cultural awareness, cultural desire, cultural knowledge, cultural skill, and cultural encounters.

The participating students completed the demographic survey and the self-administered evaluation of cultural competence via the IAPCC-SV[®] in a selected nursing course at the beginning of spring semester 2016.

Summary statistics were used to identify the demographic data and the level of cultural competence. Multiple regression was employed to determine what significant factors influencing the development of cultural competence in undergraduate nursing students. The significance level was set at .05.

Results

The 106 respondents consisted of 85 (80.2%) females and 21 (19.8%) males. The majority of students were White, non-Hispanic, and currently held a healthcare related job.

The level of cultural competence among the participating students was 61.70 ($SD = 5.80$), which indicated “a culturally competence level” based on the Campinha-Bacote’s (2007) definition.

According to item means of each subscale of the IAPCC-SV[®], the participating students had lowest item mean score on the cultural knowledge ($M = 2.68$, $SD = .40$) and the highest item mean score on the cultural desire ($M = 3.47$, $SD = .37$).

The subscale of cultural encounters, cultural knowledge, cultural desire, cultural skills, and cultural awareness significantly and positively predicted cultural competence ($R^2 = .814$, $F = 1319.59$, $p < .001$). Approximately 51% and 17% of the variation in the cultural competence level could be attributed to the predictors of cultural encounters (R^2 change = .510, $F = 122.08$, $p < .001$) and cultural knowledge (R^2 change = .17, $F = 233.77$, $p < .001$), respectively.

Discussions

In this study, undergraduate nursing students were at “a culturally competent level.” Understanding the cultural competence level and gaps in competency is an essential step that provides nursing faculty insight into the current capacity to teach cultural competence within the full range of nursing programs.

Given the evidence that most participating students had exposure to people of different ethnic background than their own and received continuing education relevant to cultural competence, the students’ cultural competence in this study might be boosted by their strong cultural desire to experience various cultures.

Cultural encounter is demonstrated when the healthcare providers directly interact with patients from diverse backgrounds. The present study findings are supportive and consistent with the literature, indicating that undergraduate nursing students who had more opportunities to interact with people of different ethnic backgrounds also had higher levels in the subscales of cultural awareness, cultural knowledge, cultural skills, cultural encounters, and cultural desire.

Limitations

The homogenous ethnicity of the students (largely Caucasian) and the unique characteristics in the Department of Nursing may limit general applicability of the results of this study.

The other limitation of this study is the data collected are based solely on students’ self-report of their perceptions; their voluntary participation in this study may have an impact on their self-evaluation of cultural competence.

References

Campinha-Bacote, J. (2007). *The process of cultural competence in the delivery of healthcare services: The journey continues* (5th ed.). Cincinnati, OH: Transcultural C. A. R. E. Associates.

Recommendations and Implications

It is suggested that educational interventions to facilitate the development of student cultural competence should engage students in caring for patients from diverse cultures and immerse students in lived experiences to increase cultural knowledge. In turn, improving culturally competent care among nursing students will lead to improved patient outcomes.

Further research should focus on identifying cost-effective teaching and learning strategies using the concept of having cultural encounters and cultural knowledge to increase students’ exposures to persons from other cultures.