

Cultural Competency in Nursing: A Concept analysis

ABSTRACT

Background: Cultural competence serves as foundational pillar for reducing disparities through culturally sensitive and unbiased quality care. Globalization and increasing migration, health care organizations and health care education are faced with new challenges. Moreover, a wide variety of instruments have been developed to appraise cultural competence, each with their own undertakings about what constitutes cultural competence.

Purpose: The objective of this study is to determine the current evidence available on the learning of cultural competence among nursing students using simulation strategies.

Methods: This concept analysis was conducted using the Walker and Avant's (2010) eight-step method. This method was used because it is one of the easiest and understandable methods for concept analysis, particularly for beginners. The eight steps of this method are: 1) Selecting a concept; 2) Determining the aims or purposes of analysis; 3) Identifying all uses of the concept; 4) Determining the defining attributes of the concept; 5) Constructing a model case; 6) Constructing borderline, contrary, invented, and illegitimate cases; 7) Identifying antecedents and consequences; and 8) Defining empirical references (Walker and Avant, 2010).

Result: The research shows that nurses can use their unique combination of knowledge and skills to make a positive impact on improving cross cultural health care. The use of concept such as cultural health, cultural education and cultural care serve as foundation in the concept of culturally competency. Nurses' attributes such as cultural knowledge, cultural sensitivity, cultural communication skills and cultural sensitivity promote environment which the nurse and patient shared a meaningful partnership in health care plan.

Conclusion: Cultural competence is an ability that is being developed gradually and that those who have already gained more experiences have been proven to be more aware and culturally competent than those with only some to little experiences.

Keywords: *cultural competency, cultural sensitivity, Nurses competency*

Introduction:

Cultural competency plays major role in the healthcare system, it portrays to lessen the disparities of individual in acquiring health services with culturally sensitivity base on their beliefs and practices. (Butler et al, 2016). Globalization and increasing migration, health care organizations and health care education are faced with new challenges. Moreover, a wide variety of instruments have been developed to appraise cultural competence, each with their own undertakings about what constitutes cultural competence. An increase in diversity among the population result to patients' complexity of their care needs and hinder patient-centered approach in care if there is lack of cultural awareness in providing quality of care. (Caspar et al., 2016, Heckman et al., 2017, Rassouli et al., 2020). Understanding the process such as cultural awareness, sensitivity transform intervention in health care outcomes. (Smith, L 2018).

In nursing profession, the ability to interact effectively with the patient will promote rapport. Establishing of trust and developing meaningful relationship within various cultural Background increase partnership in patient and nurse. Gaining cultural competence is a lifelong

process of increasing self-awareness, developing social skills and behaviors around diversity, and gaining the ability to advocate for others. It goes beyond tolerance, which implies that one is simply willing to overlook differences. Instead, it includes recognizing and respecting diversity through our words and actions in all contexts De Guzman(2016). Cultural competency is required in delivering safe care that meets patient's needs. It is partnership in health care thus communication is important in providing satisfaction of patient in health services. In addition, cultural competence contributes to reducing health disparities in healthcare facilities and improving health equity Cruz et.al (2018). In contrast, culturally indifferent care may lead to a misinterpretation of patients' needs, inaccurate diagnoses and treatment errors, and has been linked to increased health disparities.

Objective

To provide deliver quality of care to the patient with competency thus understanding patient perspective in achieving optimum level of health. This help to evaluate factors or skills for improvement of health care and improve patient relationship.

2.0. Research Methodology

This concept analysis was conducted using the Walker and Avant's (2010) eight-step method. This method was used because it is one of the easiest and understandable methods for concept analysis, particularly for beginners. The eight steps of this method are: 1) Selecting a concept; 2) Determining the aims or purposes of analysis; 3) Identifying all uses of the concept; 4) Determining the defining attributes of the concept; 5) Constructing a model case; 6) Constructing borderline, contrary, invented, and illegitimate cases; 7) Identifying antecedents and consequences; and 8) Defining empirical references (Walker and Avant, 2010).

3.0 Results&Discussion

3.1 Uses of concept

Culture Diversity in various countries and regions is imperative to be sensitive to the cultural differences affecting patients' health and development. Discussion and exchange of ideas among collaborating partners is necessary, to incorporate different philosophies and allow for the different roles that nurses assume in the health care world. Nurses can use their unique combination of knowledge and skills to make a positive impact on improving cross cultural health care. Cultural competency is possible if nurse understand the meaning of cultural sensitivity and respect in patient cultural values, beliefs, and practices. Establishing trust between the nurse and the patient create environment of partnership in the nursing care plan.

Cultural Health

Culturally diverse population is growing rapidly and the need for cultural competence is greatest in pediatric units where nurses provide care to children in collaboration with their parents (Alharbi et al., 2021). Nurses should understand and acknowledge variations that define patients from different cultural setting. The experience of nurses in care delivery to culturally diverse families is demanding and challenging because it imprints a constant tension among

barriers, cultural manifestations, and the ethical responsibility of care, incipiently revealing elements of cultural competency.

Cultural Education

There are many extant frameworks and theories of culture and cultural competence in nursing and health care; the model presented therein draws heavily from prior work and is an attempt to present a synthesis of concepts and processes in a new way. The Purnell Model for Cultural Competence includes concentric circles illustrating a global society, the community, the family, and the individual; a pie-shaped interior describes 12 cultural domains covering overview and heritage, communication, family roles and organizations, workforce issues, bio cultural ecology, high-risk behaviors, nutrition, pregnancy, death rituals, spirituality, healthcare practices, and healthcare practitioners. Another model is from Schim et al. (2017) who presented a 3-D puzzle model of culturally congruent care, defines the levels and constructs employed by this model, presents some assumptions, and lays out some basic propositions as a foundation for further work. expatriate nurses view themselves as powerless patient advocates, are hindered by the nurse-patient-family-physician quadriad structure, language, and differing beliefs about communicating death, and negotiating culturally safe care is emotionally challenging. Oakley et al. (2019)

Cultural care

Culture and care together are predicted as powerful theoretical construct essential to human health, wellbeing, and survival. The creation of sunrise model by Leininger is helpful in clinical field, the model is use when making cultural evaluation of the patient. This represents the structure of culture care theory by describing the relationship between anthropological nursing beliefs in nursing principles, the models connect the concepts of the theory with actual clinical practices while offering systematic approach to identify values, beliefs, behavior and community customs. Culture Care Diversity. Leininger postulated that there are three decision and action modes that nurses, and other professionals can use to provide culturally congruent care.

3.2 Critical attributes

The critical attributes are the core of concept analysis is to determine the defining attributes of the concept, i.e. a group of attributes which have the strongest relationship with the concept and allows analyze to obtain a deep insight. These attributes differentiate the intended concept from similar or related concepts (Walker and Avant, 2010). The attributes of cultural competency are cultural awareness, cultural knowledge, cultural competency in communication and cultural sensitivity.

Cultural awareness

Having right attitude in responding in different situation in health care services will help to deliver quality care. Clarifying individuals own values will help in responding with others especially when you are different from belief, values, and practices. the presence of these determinants influences in producing a better healthcare service delivery to the individual, families, and communities. It can be interpreted from the model that cultural, and level of awareness can be integrated as this influence a direct relationship between the two concepts; thus, as stated by Leininger (2002), the uniqueness of the person, simply referring to the

demographic profile, affects the establishment of awareness base, making a transcultural sphere of competent nursing care in the diverse worldview.

Cultural knowledge

The acquisition of knowledge with different cultures. competency as individual traits necessary for effectively performing duties (knowledge, critical thinking skills, etc.). the integration of personal cultural diversities, awareness, and sensitivity into everyday clinical practice, characterizing cultural competence as a process through which nurses deliver. culturally congruent care for patients of different cultures.

Cultural communication Skills

Culturally competent communication skills were mentioned as a learning outcome in 2 of the studies chosen to this review. These skills emerged in learning to use situation-specific and respectful interviewing skills Foronda et al., (2020,). Nursing competency is generally viewed as a complex integration of knowledge including professional judgment, skills, values and attitude, indicating that holism is widely accepted.

Culture sensitivity

Complete understanding not only holistic but providing care which is culturally congruent that fits to the sensitivity of patient. Assist them in the care that is suit to their culture. Sit down and listen to them especially when it is culturally different from you. Learning from them is also important. Respecting differences and embracing tolerance and acceptance moving toward cultural competency.

3.3 Model case

A model case is a “real life” example of the use of the concept that includes all the critical attributes (Walker and Avant 1995). Example of this Ms. Cruz state that” I encounter challenges in handling my patient. As a Nurse it is important to address those Barriers in order to provide quality care to my patient. There are some scenarios that barriers in communication mostly occurred. I also witness injustice with it come to delivery of care. Inequality in health care services is commonly occur in health care setting.”

The case represents on how nurse respond in situation where there is presence of challenges in the delivery of care to diverse patient. Cultural competence is the continuum of empathy where in humility and extreme openness to listen and learn from the patient is important to provide optimum level of care. Human being hold equal value (1) all humans are diverse from each other in the same way yet part of the global community (2) human are inherently altruistic (3) all human are equal value (4) cultural conflict is normal and expected part of life (5) all human are lifelong learner. This assumption serves as guide on how nurse function in the delivery of care. Giving care with equality will help in achieving health care outcome.

3.4 Borderline case

Borderline cases contain some of critical attributes of the concept being examined but not all of them (walker and Avant, 1995). The following is an example of boarder line case for culturally competency care. 28 years old admitted to hospital due to traumatic injury, the patient

have low survival rate. The family stay always stay on the patient side, praying, having rituals for the patient. Due to this incidence nurses feel uneasy in carrying their work. Completing an initial culture assessment would have lessened the burden on the nursing staff and allow them to interact with other patients without neglecting the cultural need.

The case represents on how cultural competency apply in the situation. Nurses to view patients attribute such as incitement, experiences and notion about health care and illness. cultural awareness, cultural skills, cultural knowledge, cultural encounters and cultural desire. Nurses who give care to multicultural patients must be able to recognize and respect other cultures and values, as well as deliver meaningful care to patients of many cultures via successful interactions (Jeong, 2016).

3.5 Antecedent

Antecedents are events which happen before the intended concept (Walker and Avant, 2010). The antecedents of the concept of cultural competence are cultural diversity, cultural encounter and interaction, cultural humility, and organizational support.

Cultural diversity

Cultural diversity, and inclusivity in nursing strive to combat differences in healthcare that lead to worse health outcomes for disadvantaged racial and ethnic groups (Luu, 2019). In most countries, the crux that emphasizes competent care's dimension is recognizing beliefs and culture before caring for others. Incorporating three significant domains, awareness, behavior, and communication, makes these interactions more accessible, productive, and successful. Competent transcultural health care services with the appropriate interventions have been identified as essential for delivering safe health care in the internationally (Alshmemri, 2021).

Cultural encounter and interaction

Diverse populations require personalized approaches to meet their healthcare needs. Living in an increasingly multicultural society, nurses are regularly required to care foremployees from a variety of cultural backgrounds. Considerable cultural clashes may arise when patients are hospitalized and receive care from healthcare professionals who do not understand the host's principles, cultural beliefs, and values. The healthcare workforce in a unique multicultural workforce that is a mix of one and significant other nationalities. Nurse must listen to the needs of their patient to provide quality care.

Organizational Support system

Diversity within specific workplaces is not a wonder in any healthcare institution. Clients and families most likely act and think differently compared to their care providers. Nevertheless, in many host countries, like in a culture influenced by other beliefs, there are challenges because of the values they strongly embrace in their honor and integrity (Al-Hanawi, 2019). Evidence of transitory changes in practitioner attitudes and patient experiences influence on patient treatment. Strong organization support like providing workshop to the staff nurse is important to promote competency. Creating strategic planning is important in the execution of health care service, through this it will enable to work in the more consistency in providing care. Cultural

competency training for healthcare personnel is the most common and well-studied cultural competence intervention.

3.6 Consequences

Consequences of a concept are events that happen due to its presence (Walker and Avant, 2010). The consequences of cultural competence include consequences related to care receivers, those related to care providers, and health-related consequences.

Patient Care

Caring is enabling which facilitate to assist, guide, and help someone and to help with the culture. Rendering care to various patient is quite challenging, complete understanding to their situation must give Importance. Providing cultural congruent care that fits to their culture. It is necessary to incorporate them with the health care plan, learn to listen and understand their cultures. Don't just like respect their culture, appreciate it. To serve the needs of a diverse population, the healthcare system must take measures to improve cultural competence and racial and ethnic diversity (Al-Yateem et al., 2015).

Nurses Competency

Nurse must be culturally competent. It must possess knowledge, skills, and attitude. The goal of nurses is to give meaningful quality of care during their hospitalization. To become sensitive to the needs of the patient. The nurse provider must do something to gain the trust of the patient because through trust this will help to lead in establishing rapport. The actions should involve cultural care preservation, cultural accommodation, and cultural care repatterning or restructuring. The nurse can transform keeping the goal and purpose and maintaining open discovery. through our cultural encounter and interaction, we gained experiences on how to develop and implement health care quality that fits to culture sensitivity.

Health-related consequences

Nurses' cultural competence reduces the effects of cultural and ethnic discrimination on care and gives a sense of worthiness to patients from different cultures. emphasizes competent care's dimension is recognizing beliefs and culture before caring for others. Incorporating three significant domains, awareness, behavior, and communication, makes these interactions more accessible, productive, and successful. Cultural competency is a complex paradigm in which culture plays the most significant challenge to evolving nursing practices' effective delivery.

3.7 Empirical references

The last step to concept analysis is to determine empirical references for the main attributes of the concept. Empirical references can further clarify the concept and facilitate its measurement (Walker and Avant, 2010). Based on the attributes of Cultural competency have differ on measuring Some of these tools include Campinha-Bacote's Inventory for Assessing the Process of Cultural Competence Among Healthcare Professional-Revised (Campinha-Bacote, 2002). Comprehensive tools to measure cultural competency, thus limiting the ability to evaluate this aspect of nursing practice; more research is needed to develop these tools (Purnell, 2016).

The rainbow model of cultural humility provides visual support to enhance understanding in patient needs. This offer approach and strategies in the interrelationship between nurse and

patient. It also provides concrete decision making and understanding challenges based on patient needs acknowledging differences and appreciating values, beliefs, and practices.

The model for cultural competency by Purnell, the model explains a foundation for understanding about different cultures allowing nurses to view patients' attributes such as incitement, experiences and notion about health care and illness. The model represents aspects of global society as well as community, family, and person. In addition, Campinha-Bacote model of cultural competency incorporates five components, cultural awareness, cultural skills, cultural knowledge, cultural encounters, and cultural desire. Considerable cultural clashes may arise when patients are hospitalized and receive care from healthcare professionals who do not understand the host's principles, cultural beliefs and values. The healthcare workforce in a unique multicultural workforce that is a mix of one and significant other nationalities.

4.0 Conclusion

Cultural competence is an ability that is being developed gradually and that those who have already gained more experiences have been proven to be more aware and culturally competent than those with only some to little experiences. Identify the values, beliefs, attitudes, and health needs of each client, accounting for all aspects of culture when planning care.

Cultural care competence, and all of which are being investigated regarding their presumed role in decisions and perspective which includes factors that cause misconceptions on healthcare in terms of culture; hence creating an individualized care approach requires systematic integration of the sociocultural structure dimension in the application as collective health (Holistic focused care) towards the nursing practice for the individuals, families, and communities.

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