

Evaluating the Impact of Global Clinical Immersion Strategies In Undergraduate Community Health Nursing Education

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BACKGROUND & SIGNIFICANCE

- Nurses encounter a variety of cultures and beliefs
- It is important to include cultural care competencies in nursing education
- Faculty globalized the undergraduate Community Health Nursing (N456) curriculum to include:
 - Global immersion experiences in Ecuador & India
 - Videoconferencing w/ nursing schools in Haiti, India & Botswana
 - Glocal projects w/ vulnerable & cultural groups in Michigan

PURPOSE

- The purpose of this project was to evaluate the three clinical immersion strategies that have been implemented to globalize the Community Health Nursing curriculum, starting with an assessment of the students' cultural intelligence.

RESEARCH QUESTION

- How effective are each of the three global clinical immersion strategies in changing students' knowledge, skills and attitudes related to cultural care competencies?

METHODS

- The Cultural Intelligence Scale (CQS) assessed 54 students enrolled in the Winter 2016 semester of N456 Community Health Nursing at the University of Michigan School of Nursing.¹
 - Includes 20 questions in four categories:
 - meta-cognitive,
 - cognitive
 - motivational
 - behavioral
 - Measures ability to work and behave in a culturally diverse environment
- Data collection occurred on the first day of the N456 clinical section and in their last class of the semester. (Students were informed that they were not required to complete the survey.)

DATA ANALYSES

- IBM Statistics SPSS v23 was used for analysis of the data
- Descriptive analyses were used to describe demographic characteristics and survey item means
- Paired T-Test was used to compare means from the pre- and post-evaluation

RESULTS

- 46 students completed the pre-evaluation and all but eight of those completed the post-evaluation.
- Students ranged in age from 21 to 24 years with a mean of 21.53 years
- 87.2% were female.
- 80.9% were White.
- Asian (6.4%), Black (6.4%) and Hispanic (4.3%) students make up less than 20% of the student group.
- Analysis of differences between Times one and two demonstrate significant changes in the student's CQ.
- Mean scores at Time 1 ranged from 3.2 to 6.0 and between 4.3 and 6.3 at Time 2.
- The paired T-Test shows changes were significant at $p < .05$ in all but 3 variables (see Table 1).
- 25% of students reported that the experiences in N456 were the sole cross-cultural experiences they had encountered

Cultural Intelligence in Undergraduate Nursing Students

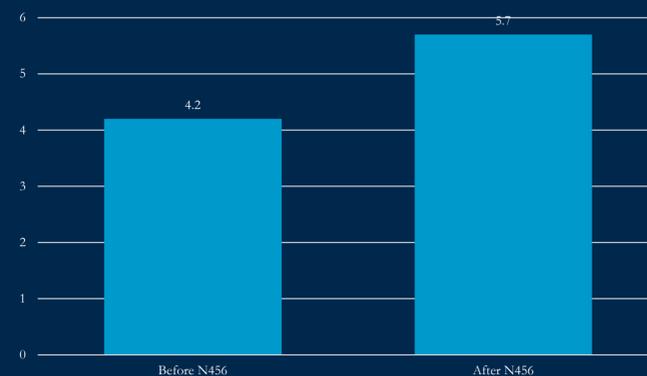


Table 1. The Cultural Intelligence Scale¹

Item	Pre Mean	Post Mean	Sig. (2 tailed)
Metacognitive			
I am conscious of the cultural knowledge I use when interacting with people with different cultural backgrounds	5.3	6.2	.000
I adjust my cultural knowledge as I interact with people who are unfamiliar to me	5.5	6.1	.000
I am conscious of the cultural knowledge I apply to cross-cultural interactions	5.3	5.8	.004
I check the accuracy of my cultural knowledge as I interact with people from different cultures	5.3	6.2	.000
Cognitive			
I know the legal and economic systems of other cultures	3.3	4.3	.000
I know the rules (e.g. vocabulary, grammar) of other languages	3.4	4.3	.001
I know the cultural values and religious beliefs of other cultures	4.7	5.5	.000
I know the arts and crafts of other cultures	3.6	4.3	.006
I know the rules for expressing non-verbal behaviors in other cultures	4.1	4.8	.005
Motivational			
I enjoy interacting with people from different cultures	6.0	6.3	.090
I am confident that I can socialize with locals in a culture that is unfamiliar to me	5.0	5.9	.000
I am sure I can deal with the stresses of adjusting to a culture that is new to me	5.4	5.9	.006
I enjoy living in cultures that are unfamiliar to me	4.8	5.3	.002
I am confident that I can get accustomed to the shopping conditions in a different culture	5.3	5.7	.026
Behavioral			
I change my verbal behavior (e.g., accent, tone) when a cross cultural interaction requires it	4.8	5.3	.242
I use pause and silence differently to suit cross-cultural situations	5.3	5.7	.055
I vary my rate of speaking when a cross-cultural situation requires it	5.0	5.3	.004
I change my nonverbal behavior when a cross-cultural situation requires it	4.8	5.8	.000
I alter my facial expression when a cross-cultural interaction requires it	5.0	5.4	.034

TEACHING IMPLICATIONS

- Nursing student exposure to cross-cultural experiences in their undergraduate program can improve their cultural care competency
- For some students these are the first cross-cultural experiences they have encountered

NEXT STEPS

- Students will complete the CQS upon entering and completing N456 in the next 2 semesters.
- Student responses will be analyzed by category to identify any needed changes in the N456 and its associated PNE clinical course curriculum.
- Determine if there are differences in the clinical groups and the type of cultural immersion experiences students receive.
- Potentially conduct focus groups to further explore impact of clinical experiences; given the positive results obtained, this may not be necessary at this point.



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¹Cultural Intelligence Center (2005). Cultural Intelligence Scale (CQS) (2005). In Ang, S., Van Dyne, L., Koh, C., Ng, K. Y., Templer, K. J., Tay, C. & Chandrasekar, N. A. (2007) Cultural intelligence: its measurements and effects on cultural judgment and decision making, cultural adaptation and task performance. Management and Organization Review, 3(3); 335-371, doi:10.1111/j.1740-8784.2007.00082.x