



Cultural competency awareness and Challenges in Nursing Practice among Nursing Students at Faculty of Nursing Science in IUA, Sudan 2022

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Abstract: background: Being culturally competent overcomes the challenges medical professionals are experiencing when caring for their culture diverse patients.

Objectives: To assess the cultural competency knowledge and the Challenges in Nursing Practice among nursing students in International University of Africa.

Method: qualitative method was used to assess the knowledge of nursing students in IUA. Purposive sampling of (15) students from different Africa countries were enrolled in the study. The data collected by interviewing students from second to fourth year in Faculty of Nursing. In addition, three focus groups were conducted with students at second, third, and fourth level. The data were coded and thematic analysis technique was used to analyze the transcripts of the focus groups. They were asked about their awareness on culture diversity and the challenges they are facing in with Sudanese patients. **Results:** All the participants were female between the age of (21 -27)All were knowledgeable after they came to Sudan but two third of participants were willing to learn more about Sudanese culture and a third were not willing to learn and engage with Sudan culture. The main challenge facing the students is language barrier. **Conclusion:** The students are aware of cultural diversity, have little knowledge about Sudanese culture and half of them are able to deal the challenges. Almost all of them are willing to engage in the Sudanese culture.

Recommendation: The study recommended that the faculty of nursing science should include transcultural competency course in the curriculum.

INTRODUCTION

Transcultural nursing and culturally competent care had its origins in the mid-1950s (Leininger, 1970, 1978, 1995)., Cultural competence was commonly identified as “an ongoing process of seeking cultural awareness, cultural knowledge, cultural skill and cultural encounters in which the healthcare professional continuously strives to achieve the ability to effectively work within the cultural context of the patient, family, individual or community” Likewise, culturally competent nursing care aims to improve the quality of health care by reducing cultural disparities that arise when different cultures meet in the health care context. Leininger, M. (1991),

The tenets of cultural competency should be infused throughout the nursing education curricula for nurses to meet the holistic needs of the patients. Hence, Nursing educational programs have a responsibility to adequately prepare their graduates to provide culturally competent care. Harman,D.S. (2017).Culturally competent nursing education is the process of adjusting teaching and learning techniques in a learning environment that respects, values, empowers all members of the instructional team, including nursing students, educators and peers to accommodate the diversity. It starts with an assessment of the student’s needs and integrates student interactions, curricula, in class and online factors, and most importantly culturally competent Nursing

educators committed to lifelong learning. Almutairi, A. F., McCarthy, A., & Gardner, G. E. (2015).Cultural Competent nursing care helps to ensure patient satisfaction and positive outcomes. Chrisman, N.J. (1998). clients need to derive a sense of cultural safety in the healthcare environment. This environment needs to engage clients as partners in care where efforts are made to establish respect and rapport, cultural negotiation, and where compromise is conducive for promoting a sense of safety. (Narayanasamy, 1999b). There is a consensus that a sense of cultural safety is most likely to promote trust and therapeutic relationships which are vital for interventions designed to meet cultural needs (Narayanasamy, 2002).its very important that nurses are diversified in various cultures in order to better care for the patients. Mareno and Hart(2014), nurses need to be prepared to function in a global environment, and in partnership with other healthcare disciplines. Chrisman, N.J. (1998).

Cultural competence is an essential entity for the students of IUA because they originated from different cultural backgrounds besides Sudan is a country with a unique blend of a different tribes who diverse in their cultures, social values and languages which can often produce challenges, create barriers to culturally safe practice between nursing students and patients. Hence this study aimed to assess the cultural competency awareness and the challenges in Nursing Practice among nursing students in IUA.)

METHODOLOGY

Study design:

Qualitative study design was carried to assess the awareness and challenges of cultural diversity in nursing practice among nursing students of the faculty of nursing science at International university of Africa.

Study Setting:

The study was conducted at Faculty of Nursing science in International University of Africa located in Khartoum – Sudan founded in the year 1977. Currently, the total number of students enrolled in the undergraduate nursing program is about (333) undergraduate nursing students from 86 nationalities. The majority of the students enrolled in the program are African (non-Arabic speaking natives) with a small portion of Arab and Sudanese students. The nursing program curriculum requires the students to attend Arabic studying pre admitted to nursing program. The nursing schedule insured that the students discussed the case in the hospitals corresponding Sudanese culture.

Study population:

The eligibility criteria to participate in this study included all students actively enrolled in the undergraduate nursing program, 18 years old or older, students from the three-year levels (i.e. 2nd, 3rd, and 4th year students) were included in the study. The nursing faculty consists of four levels which contains three hundred thirty three students amongst which fifteen students were selected randomly from second year, third year and fourth year. The three levels were selected because they have spent enough time in the clinical setting than the first-year students. From each level five students were selected.

Exclusive Criteria:

1. first year nursing students
2. Arabic native and Sudanese students
3. Those who refused to participate

Qualitative data:

Open discussion was taken and used to analyze the data on the focused groups; the researcher the categorized the main findings into themes.

Sampling size:

Fifteen students were selected from second ,third and fourth year.

Data tool:

A small group discussion (Focus-group questions addressed topics)was carried out to interview the nursing students on questions about cultural Competence including awareness which contained two questions, three questions on Cultural knowledge, three on Cultural skill, two on cultural desire and four about the challenges faced .

Data technique:

Five students were selected from second year, five from third year and five from fourth year. Every group was interviewed separately on a specific day and the group discussion took an hour under the supervision of the supervisor. (The group is headed by a moderator, and a facilitator helps to conduct the interview. The authors shared these roles)

Data analysis:

The data was analyzed in written form and no figures or charts were used. (analyzed the data using thematic content analysis,)

Ethical Consideration:

An approval/ written consent to conduct the study was gained from the research committee of faculty of nursing science and the dean of nursing faculty. Oral consent was taken from the nursing students after explaining the importance of the research.

RESULTS

- 1- First findings of qualitative analysis
- 2- Descriptive analysis

Table 1: Demographic characteristics of study participant

Participants	Frequency	Percentage %
Age in years		
21-22	4	27%
23-24	6	40%
25-26	4	27%
27-28	1	7%
Total	15	100%
Nationality		
Uganda	2	13%
Kenya	2	13%
Somali	2	13%
Nigeria	2	13%
Ghana	2	13%
Gambia	2	13%
Ethiopia	1	7%
Djibouti	1	7%
Tanzania	1	7%
Total	15	100%

Findings of focus group

The data was collected under small group discussion of the theme challenges facing International University of Africa nursing students about transcultural nursing.

Theme 1: Cultural awareness

All students acknowledge Sudanese culture related to common type of foods, language, dress, marriage, dance, values and beliefs.

most of the students get to know Sudanese culture when they came to Sudan. a quarter of them knew Sudanese culture before coming to Sudan through television ,reading books and orientation from their home teachers who knew about Sudan.

Theme 2: Cultural knowledge

A quarter of the students get to know Sudanese culture from their colleagues in the hostel, faculty and some at the hospital during their practice.

Most of the students don't seek any additional educational courses to know more about Sudanese culture. However a third took on certificate courses to know more about Sudanese culture

All students agreed that transcultural nursing should be included as a subject in the nursing curriculum.

Theme 3: Cultural skills

Some learned the Sudanese local Arabic to engage with the patients (), ask the teacher's help for communication with the patient. Some were helped by the Sudanese students. While others used gesture language, and the students described how they often used nonverbal communication or a supervisor and interpreter when there were language barriers.) (their experience of learning in a multicultural environment)

Theme 4: Cultural desire

Two third of the students express their desire and willingness to learn more about Sudanese culture to enable them engage because their culture is similar to somehow to the Sudan culture and other were motivated by the way they respect and welcome people and the kind of dressing they wear. a third are not willing to engage with Sudanese culture.

Theme 5: Challenges:

The main challenge the students are facing is language barrier because they are taught the real Arabic language when they come to Sudan for one year and when they start their classes they are being taught in local Sudanese Arabic language.

The other challenge faced by students is that many Sudanese patients had strong believe in traditional and herbal medication were traditional healers, better than the medications they are receiving in the hospital.

Most of the students have faced with patients that practice cultural imposition and it was difficult for them to deal with. Most of the students thought the teacher's are culturally competent and that is what helps them knew more about sudanese culture and dealing smoothly with the patients. which disagrees with result of this study that shows that the majority of academic nursing educators had a moderate level of overall cultural competence. They are committed to transcultural teaching behaviours as a motivator and predictor toward pursuing cultural competency. Nurse educators with more work experience, fluent of other language and integrating culture in their courses, were more culturally competent. Nationality doesn't affect culture competence. Campinha—Bacote,J.(1999).

DISCUSSION

The cultural competence is an essential attribute in nursing graduates entering all settings. Increased exposure of students of diverse culture to develop a culturally sensitive approach to professional practice. International nursing literature indicates that culture content that includes both knowledge, personal attitude and behavior changes is important to the development of multicultural perspective. (Meleis 1996)

Most of the nursing students don't seek additional educational courses to learn more about Sudanese culture which disagrees with a research done by Richardson, L.(2000) in which most of the participants explored in seeking cultural knowledge from childhood and reading stories about different culture and places in the world .on the other hand most of the nursing students get to know Sudanese culture after they came to Sudan this findings is similar to a research done by Richardson, L.(2000) concluded that many came to realize or know diverse culture only when they travelled.

First through learning the language for the first year helps them in communicating with the patients .In addition to also learning the local Arabic language their teachers guide them during the clinical practice by telling them about the symptoms or taking history with them in Arabic, also when administering medication and giving health education, Most of the students believed that teacher's are culturally competent.

From the small group discussion all students were able to overcome the misunderstandings by respecting the patient's cultures and by telling the patient that the care, medication and health education is for their health benefits .

Two thirds of the students are willing to engage with diverse Cultures and especially Sudanese culture and this is because the Sudanese people are very welcoming and love to receive guest. (express their desire and willingness which is an important key element to develop cultural competence)

A half of the students came across patients who practice cultural imposition and they overcome it by accepting the patient's culture and improving their nursing skills .for example by introducing themselves to the patient first and explaining to them the benefits of the medications, care and considering their herbal medications telling them that "You can't stop at once but try to minimize and use them with the prescribed medications in small quantity which will bring less complications"

From the small group discussion the students themselves do not practice cultural imposition by adapting with the Sudanese culture in order to deal with patient smoothly and by considering the patient's culture.

All students agreed in including transculturally nursing in the curriculum which agrees to the result of the current study indicates that cultural competence can be increased by including structured cultural content in nursing curriculum being compromised of four aspects which are culturally

awareness, knowledge, skills and desire. Focusing culturally competent at each level of nursing students

The main barrier is the communication similar to (South Africa Karlskrona May 2018) where barriers in providing a cultural competent care with three subcategories: disrupted communication, limited levels of cultural knowledge and lack of trust. Disrupted communication was mostly due to the language barrier, a huge problem as important information was left out and the system of getting interpreters faulted .The strong belief in traditional healers and traditional remedies

All students are aware of Sudanese foods because they are more exposed to it either in hostels or the markets and due to the hospitality of Sudanese .They are welcoming people and they won't send you back to your place or home till you eat something from them even if its small.

CONCLUSION

All students are aware of diverse Cultures although some came to know when they came to Sudan.

Two thirds of the students didn't have enough knowledge about Sudanese culture and had cultural skills on the other hand half of the students are willing to engage with Sudanese culture.

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