



## HEALTH TOURISM CONCEPT AND TRANSCULTURAL NURSING ACCORDING TO THE MEANING WORLDS OF NURSES

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Research Article

**Abstract:** Purpose: This study aims to describe health tourism and transcultural nursing concept from the viewpoint of nurses and to find out how they interpret them. Method: As a mixed study, it was conducted at 6 private hospital with the participation of sixteen nurses. Data were collected with demographic information form, intercultural sensitivity scale and semi-structured interview form. Result: The mean of cultural sensitivity scale score of nurses was  $81.39 \pm 4.84$ . Cultural sensitivity levels of nurses were not correlated with gender, marital status, age, education level, professional title and transcultural nursing training background. Only one nurse had transcultural nursing training. Lack of foreign language and cultural knowledge are problems for nurses while caring to foreign patients. Conclusion: Nurses mostly face language and communication difficulties while caring to foreign patients. Also, they need to get information and training about different cultures. Even if nurses play an indispensable and key role in health tourism, they cannot represent themselves sufficiently. Implications for Practice: The professional and personal development of nurses should increase by trainings on ethics, intercultural nursing and geography, especially foreign language. For easy and error free communication between nurse and patient, foreign language education must be integrated nursing education program.

**Keywords:** *Health tourism, transcultural nursing, nurse's experience, interpretation*

## Introduction

Every year many people have to change their places due to some economic, politic and social reasons. (Tanrıverdi, 2017; Temel, 2012). In recent years one reason was added to these. People start to travel from home country to another to regain or to protect their health. (Çalışkan, 2009). Travels for this purpose revealed the concept of health tourism. (Soysal, 2017).

Described as a traveling from home country to another for health protection and promotion, health tourism includes treatment of diseases and rehabilitation services. According to Health Ministry of Turkey a person should stay at least 24 hours at other country and utilizes health and tourism opportunities of that place for being considered as a health tourist (Aydın, Constantinides, Mike, Yılmaz, Genç & Lanyi, 2012).

Health tourism, which has a rising value among tourism types, (Heung, Kucukusta & Song, 2011; Soysal, 2017) is a multicultural sector for both healthcare providers and patients. Sometimes nursing requires to give nursing care and treatment to the persons with different cultures at multicultural environments. (Tanrıverdi, 2017; Temel, 2012). Cultural diversity is an important approach that affects the quality of care (Temel, 2012).

Within the scope of health tourism, nurses should have some cultural knowledge and skills in order to provide appropriate and sufficient care (Amiri and Heydari, 2017) to persons who want to receive health services from another country (Soysal, 2017). Firstly, nurses should have cultural knowledge about their culture and also awareness about different cultures for giving care sensitively to foreign patients (Mubita-Ngoma and Mayimbo, 2017).

The scarcity of research related to health tourism and nursing in the literature and the lack of clarity between concepts (Ben-Natan, Ben-Sefer, and Eh-renfeld, 2010; Çevirme, Kaynak and Uğurlu, 2014) raised the question of how nurses interpret these concepts Nurses have great importance in health sector and the meaning of concepts for persons effect their private and professional lives. Because of that reason we think that this study contribute to nursing care and its quality.

## Aims

The aim of the study was to describe health tourism and transcultural nursing from point of view of nurses and to find out how they interpret these concepts.

The main research question was “What are the health tourism and transcultural nursing according to nurses?”

The sub-research questions were as follows:

Research Question 1: What are the health tourism and transcultural nursing?

Research Question 2: How do nurses experience health tourism and transcultural nursing concepts?

## **1. Method**

In this study mixed research method was used. Quantitative data were collected with demographic information form and intercultural sensitivity scale; for collecting qualitative data, on the other hand, semi-structured interview form was used. According to “Regulation Concerning International Health Tourism and Tourist Health” dated 13.07.2018 from Turkish Health Ministry, if any healthcare facility wants to operate within the scope of international health tourism, it must have an international health tourism authorization certificate. Participants were recruited from six private hospitals, having international health tourism authorization certificate, located in Kayseri Province in Turkey.

### **1.1. Participants**

Selected by using a purposive sampling method, participants consist of 16 nurses who are working at private hospital. They attended voluntarily.

The inclusion and exclusion criteria were

- a) Private hospital which has international health tourism authorization certificate
- b) Nurses who had at least undergraduate education
- c) Nurses who had over 2 years of experience providing nursing care to foreign patient
- d) Participant is excluded if he/she wants to leave from study at any stage.

### **1.2. Measurements**

Questions on demographic information form and semi-structured interview form were developed from a review of the literature by researchers. Demographic information form consist of gender, age, marital status, professional time and title, education level, transcultural nursing training

background and nursing care experience to foreign patients. Semi-structured interview form aims to figure out nurses' experiences acquired over time related to foreign patients (see Table 2). Developed by Chen and Starosta (2000), intercultural sensitivity scale, 5-point Likert-type having 24 items that examined the nurses' intercultural sensitivity levels. The average duration of the interviews was 15 minutes. Each interview was audio recorded. After that, researchers listened and transcribed the records into text word-by-word.

### 1.3. Ethical Considerations

The Ethical Committee of Erciyes University Social and Human Sciences approved this study. Private hospitals gave written permission. Also, it was obtained informed consent form and tape recording approving from participants.

## 2. Results

Sixteen nurses entered into the study. Participants consist of twelve female and four male nurses. One out of every four had Bachelor's degree. All of them were working in private hospitals. Their working experiences were between 2 to 36 years (Mean= 13.13±12.19). They had 2-8 years nursing care experience to foreign patients. Only one nurse had transcultural nursing training (see Table 1). The mean of cultural sensitivity scale score of nurses was  $81.39 \pm 4.84$  and below the average. Spearman's Rho (two tailed) was used to assess the association between the cultural sensitivity scale score of nurses and socio-demographic characteristics of nurses. Findings indicated that cultural sensitivity scale score of nurses were not correlated with gender, marital status, age, education level, professional title and transcultural nursing training background.

According to qualitative part of the study, results that have participants' thought and experiences were surveyed three main themes. These themes were; health tourism, transcultural nursing and experiences of participants. Themes and related questions are shown in Table 2.

Table 1. Demographic Characteristics of the Participants (N=16).

<b>Variables</b>	<b>n</b>	<b>%</b>
<b>Gender</b>		
Female	12	75
Male	4	25
<b>Age, years</b>		
20-24	2	12
25-29	5	31.3
30-34	3	18.8
35-39	1	6.3
40 and above	5	31.3
<b>Education level</b>		
Associate degree	3	18.8
Bachelor's	12	75
Master's or above	1	6.3
<b>Marital Status</b>		
Married	11	68.8
Single	5	31.3
<b>Professional title</b>		
Manager	4	25
Unit supervisor	6	37.5
Clinic nurse	6	37.5
<b>Transcultural nursing training</b>		
Have	1	6.3
Have not	15	93.8

Table 2. Interview Questions

THEMES	QUESTIONS
Health Tourism	What is the first thing coming to your mind about health tourism? What do you think about health tourism? What are the roles and responsibilities of nurses on health tourism? What is the place and importance of nurses on health tourism?
Transcultural nursing	What is the first thing coming to your mind about transcultural nursing? What do you think about transcultural nursing?
Experiences	What have you experienced while providing nursing care to foreign patient? What are the difficulties of providing nursing care to foreign patient How have you overcome these difficulties? How would be easier to provide nursing care to foreign patient?

First theme is related to health tourism concept and resolved by four questions.

First thing coming to nurses' mind about health tourism. Some of the participants' answers to this questions are like that;

“Interaction... a concept that is intertwined with health and tourism (P.16)”

“It is the process of foreign patients getting health care in our country (P.1)”.

Another participant from holistic point of view stated that “It is the fact that people move to a different country in where have higher treatment center, medical center for regaining their physical, mental and spiritual health and receive treatment (P.8)“.

According to participant 6, “health tourism represent different language and people from different cultures.” Participant 7 interprets as “an income and advertising channel for Turkey”.

Participants' thought about health tourism. Participant 3 from a perspective on research and development described this concept like that “To investigate the health structure and functioning of different countries.” According to some participants, “it is an individual freedom to choose of health facility, doctor and country” (P.5) and “to be able to provide health services fairly” (P.9), “To be able to do our best so that people can achieve better quality living conditions” (P.7). “The effect of technological developments on health.” (P.10)

Health tourism consists of health and tourism concepts, so it could be evaluated as a service that provides health and tourism services together (P.11). This is a reason that creates health tourism. People go to other countries for getting health related services.

“You can be sufficient in terms of medical devices and equipment, due to the lack of staff like nurses and doctors or lack of experiences of medical staffs. People can think to get medical supports from another place” (P.4)

Some participants laid stress on nursing care about the roles and responsibilities of nurses on health tourism. Even if nursing care is one of the main roles of nurses, participants mentioned that nurses’ roles cannot be limited just nursing care and it is crucial to improve nurses’ professional and personal development for increasing quality in nursing care (P.2, P.4, P.10, and P.15).

Some participants referred to the relationship of trust, which is important in establishing the therapeutic relationship between patient and nurse as a nursing role and responsibility at health tourism (P.11, P.8).

“Doctor prescribes medication, tells the treatment, but I am the one who will provide care and service. In order to be able to provide the correct service, I need to understand the patient” (P.14).

Thoughts of nurses about what the importance and place of nurses on health tourism were significant. As a member of health team, nurses “At the key point... a bridge between doctor and patient” (P.1).

Some participants criticized nurse’s place on health tourism like that “In fact, medical treatment services are the same as those offered by the physician in other countries. So there is a method. I think that nurse is very effective on health tourism. If we can reveal our talent in terms of care and communication, if it is possible of course, I think nursing care will affect the medical treatment... nursing care services will be very effective on health tourism” (P.15),

“Nurses are of secondary importance in health tourism” (P.13) and

“Foreign patient come to Turkey for doctor or health facility’s reputation. Doctors just give orders about what should be done. On the other hand, nurses are responsible for more jobs and patient satisfaction depends on nurses” (P.7).

The second theme of this research is related to transcultural nursing. Some participants evaluated this concept as a nursing service given to persons from all over the World. One participant emphasized that whole and complete nursing care should be given to patients regardless of the differences of religion, language, and race, social and cultural status (P.1).

According to participant 16, “transcultural nursing is acceptance, understanding and respect.”

A few participants mentioned that nursing is the same regardless of time, condition and country, it is the culture of the individual that makes care different.

“Nursing is same at all times and conditions. Because basic care needs of a person are always the same. It does not matter what the person’s culture is. Every person has same basic needs like, food, water, love, safety. These needs are unchangeable. Except culture. While given nursing care, nurses should pay attention moral side of the culture.” (P.7)

“...maybe cultural expectation can change otherwise nursing care are the same everywhere” (P.1).

Third theme of the research is experiences of nurses while providing nursing care to foreign patient in health tourism. A few participants said that foreign patients had higher expectations. This is probably the result of the differences between home country and host country health system.

According to participant 7, “This can be related to difference of privacy feelings of patients. Their expectations are different. In order to meet those expectations, it is necessary to know their sensitivity and what their privacy is. If we know what they like or not, our approaches will change.”

All of the participants gave the same answer directly or indirectly about what the difficulties of providing nursing care to foreign patient are and emphasized the importance of knowing a foreign language. They stated that their biggest challenge while providing nursing care to foreign patient was language problem. Knowing a foreign language is necessary to understand patients, to increase nursing care quality and to improve personal and professional growth.

“If we have difficulty in health tourism, this will be language problem. Except that, I think there is no problem.” (P.9)

“Knowing a foreign language will be easier for both the patient and professional groups.” (P.3)

Another problem was while providing nursing care to foreign patients was consent form. Consent forms should be prepared patient’s language.

Participant 5 stated that some female patients requested female nurses for religious sensitivities.

“I often come across Syrian female patients. They want a female nurse for taking nursing care.”



The participants developed some solutions individually for the language problem, the biggest difficulty while providing nursing care to foreign patients. These solutions involved “using various translation programs in internet” (P.1), “interpreter” (P.2), “gesticulation” (P.8) and “pictures” (P.10). A few health facilities hired interpreters. But, sometimes communication through interpreter has a risk and can increase misunderstanding between patient and nurse. As a nurse and also an interpreter, participant 11 declared her opinions about this risk like that:

“The biggest problem is torn between. Firstly, the treatment is told to me, after that I tell the treatment to the patients. If I had understood correctly, I had to ask 3-4 times at that moment. Since I am a nurse also, I can get it wrong, I can say that is wrong or cannot be done that way and I can explain the treatment such as what I know. For that reason, knowing foreign language is important and it would be easy if we speak the patient’s language.”

The last question related to easier way to provide nursing care to foreign patient consists of lack of staffs, importance of nursing education, language education and other training subject like ethic, geography.

“In our country, all nurse no matter having degree high school or bachelor can provide same health services even if they are different between in terms of educational level. Nurses working in health tourism should know different languages, should be trained in a more detailed related to foreign patients’ needs.” (P.1)

“Apart from language, ethic and geographical trainings....for understanding patients can be given geography trainings.” (P.16)

Participant 15 believe that “language is not important for nursing care. Good communication can solve whole difficulties. Nurses must know basic nursing care implements and bring the nursing care forward.

Another participant highlighted the shortage of staff and said "If our number of staff was a little more, it may be easier to care for the foreign patient" (K.2).

### 3. Discussion

The results of this study, aiming to describe health tourism and transcultural nursing from point of view of nurses and to find out how they interpret these concepts, were discussed three main themes which are health tourism, transcultural nursing and experiences of nurses.

As a first theme, health tourism was emphasized like these: interaction, getting to know different cultures and different persons, an advertising opportunity of Turkey. Also nurses mentioned health tourism components like an individual freedom to choose of health facility, doctor and country, to provide health services in a fair way and an economic income channel. It is well-known that health tourism has high economic income and this feature makes it attractive globally (Heug et al., 2011; Smith & Puczko, 2014).

Participants considered that nurses have an important place in health tourism; indispensable; and as a bridge between the patient and the doctor. However, they criticized that nurses have not been taken into consideration sufficiently and have been stayed in the background. They also mentioned the importance of nursing care, communication skill, therapeutic and reassuring relationship in health tourism as nursing roles and responsibilities.

Emphasizing the importance of personal and professional development in order to increase the quality of care, it has been stated that the quality of nursing care will increase healthcare demand not only for institutional but also across the country and make outstanding contributions to health tourism.

The findings related to transcultural nursing concept as a second theme showed that nurses need to get information and training about different cultures. For gaining cultural awareness, nurses should know knowledge about cultural differences and cultural values. According to Foronda (2008), cultural awareness includes not only respect, understanding, taking into account other people's concerns, caring, and careful thinking, care needs and also making treatment appropriate to the individual's needs.

In this study, the cultural sensitivity levels of the participants were below average. These findings were similar to some studies (Bulduk et al., 2011; Bulduk et al., 2017). Besides, findings show that participants did not have transcultural nursing education except one of them and transcultural nursing education should be included in nursing education program. Transcultural nursing

knowledge is as important as foreign language for nurses in order to take an effective and strong place in health tourism. It is thought that the quality of nursing care will be one of the required and sought qualifications for patients' selection process of the health facility and country in where they want to get medical treatment. Because of this, not only just nursing education but also its components are crucial.

In the study, it was determined that additional subjects like transcultural nursing, not just English also a few foreign language, ethic and geography could be added to basic nursing education and by that way nurses could be more familiar with different cultures. As a significant component of nursing care, transcultural nursing training will move nursing profession and nursing care quality forward in health tourism.

Nurses give care that is appropriate to the cultural, social and ethnic characteristics of the individual and that are different from each other. Nursing education give some information and opportunity to student on being comfort and sensitive to differences and complexity while they are practicing culturally competence care to person having different needs of care (Powell et al., 2008) and it must also give. In Turkey, it is expected that nurses must do same care at the same facility even if they have different educational levels. This can lead to problems, especially while caring for a foreign patient.

Sub-title of the third theme of this study is nurses' experiences is difficulties. Nurses mostly have problem on communication and cultural differences while caring to foreign patients. Knowledge, skill, positive attitude and awareness are some components of communication and important especially while interact culturally different people.

Results show that participants mostly face language and communication difficulties while caring to foreign patients. They created and used new alternative communication ways like pictures, internet translator, and body language for overcoming that difficulties. Aside from using internet, other methods are the basic communications ways. These lifesaving tools in hard situations are helpful for starting and maintaining diagnostic and therapeutic relationship between nurse and patient. True and accurate communication will reduce feel of inadequacy, stress and ambiguity and can create a mutual trust environment. Similarly, Boi (2000) stated that non-verbal communication ways help to overcome the communication difficulties between patients, patients' relative and medical staffs.

Findings show that communication is being through interpreter in some facilities, but risky and can increase misunderstanding during translation. Hence the study of Al-Amer et al. (2016), an interpreter must transmit the meaning of the spoken language in a complete and systematic way, beyond just transmitting the message.

All participants mentioned that knowing a foreign language is crucial in health tourism. Similarly, previous studies remarked that nurses had language problem while caring for different language speaking patients (Boi, 2000; Nielsen, 2009; Ngai et al., 2016; Ian et al., 2016). Language and cultural problems based on both nurse and patient can restrain nurses from practicing accurate and effective nursing care (Almutairi et al., 2015). Similarly, Maeno et al. (2011) showed that Japanese nurses could have difficulties because of the language and cultural differences while caring to foreign patients. A study showed that one of the dissatisfaction with the American health system of patients was language barrier with 7.9% (De Gagne et al., 2015). Amiri and Heydari (2017) found that giving nursing care to foreign patient could be challenging due to the language and cultural differences. Also, this situation sometimes causes nurses hopeless, fear and anxiety, and can lead them to avoid the patient. According to Hull (2016), language is the voice of culture and at the same time culture creates language. Not speaking same language can be lead to chaos, stress and disappointment among people.

In conclusion, language education must be integrated nursing education program. If it happened, nurses and foreign patients' communication could be easy and error free. According to Heung et al. (2011), language problems can be an obstacle for foreign patients. In order to overcome this problems and to provide health services at international standards within the scope of health tourism medical staff with foreign language knowledge needs to be recruited. Also, knowing more than one language not just English will increase nurses' job opportunity international level.

#### **4. Limitations of the study**

This study had sample limitation because of that only was conducted at private hospitals which has international health tourism authorization certificate. Besides, since this study includes qualitative research method and answers of nurses had their point of views that cannot be generalized.

## 5. Conclusion and Implications

Through the mixed research methods, this study shows that nurses should improve their foreign language and transcultural nursing knowledge. Health tourism and providing nursing care to foreign patients both can be challenging for nurses and also offer them some opportunities. Getting to know different cultures and learning different languages can be motivating for the personal and professional development of nurses. The quality of nursing care will increase patient satisfaction and healthcare demand not only for institutional but also across the country. Thus it will reveal the difference of Turkey in health tourism across the world. It is thought that nurses who speak foreign languages and have cultural competence will make outstanding contributions to health tourism. In order to thrust nursing profession forward in health tourism, the professional and personal development of nurses should increase by trainings on ethics, intercultural nursing and geography, especially foreign language.

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