The Effect of Intercultural Nursing Training on Nursing Students’ Intercultural Sensitivity and Empathic Tendency Level: Randomised Controlled Trial

Kültürlérerası Hemşirelik Eğitiminin Hemşirelik Öğrencilerinin Kültürlerarası Duyarlılığı ve Empatik Eğilim Düzeyine Etkisi: Randomize Kontrollü Çalışma

Ganime CAN GÜR¹, Emine YILMAZ²

ABSTRACT

This research was planned in randomized controlled trial in order to reveal the effect of intercultural nursing training on cultural sensitivity and empathic tendency level among nursing students. 120 students were included in the sample group. Students in the study group attended in intercultural nursing training 2 hours a week for 8 weeks. There was no application for the students in the control group. Descriptive statistics, independent and dependent t tests were used to appraise the data. It was observed in the study that before the training, the cultural sensitivity total score of both control and training groups was at moderate level. After training: the total Empathic Tendency Scale score of the training group was higher than the control group's and the training group’s total scores for Intercultural Sensitivity Scale, subdimensions regarding interaction engagement and attentiveness, and respect for cultural difference were higher than the control group. The results of the research showed that intercultural training was effective in increasing the intercultural sensitivity and empathic tendency level and enabling the students to acquire empathy skills. As a result, it has been observed that intercultural training is effective on students’ gaining empathy skills.

Keywords: Empathic Tendency, Intercultural Sensitivity, Nursing, Training

ÖZ


Anahtar Kelimeler: Empatik Eğilim, Kültürlérerası Duyarlılık, Hemşirelik, Eğitim

Necessary permission from the Dean’s Office of the Faculty of regarding the research and Bingöl University Scientific Research and Publication Committee permission were obtained (dated: 09.01.2019 and numbered: 01).

¹Dr. Öğr. Üyesi, Ganime CAN GÜR, Psikiyatri Hemşireliği, Pamukkale Üniversitesi Sağlık Bilimleri Fakültesi, ganimegur@pau.edu.tr, ORCID:0000-0002-6013-257X
²Doç. Dr., Emine YILMAZ, Psikiyatri Hemşireliği, İnönü Üniversitesi Hemşirelik Fakültesi, emine.tog@hotmail.com, ORCID:0000-0002-8224-7300

İletişim / Corresponding Author: Ganime CAN GÜR, gelis tarihi: 27.01.2021
E-posta/e-mail: ganimegur@pau.edu.tr, kabul tarihi: 25.03.2021
INTRODUCTION

Cultural differences have increased in many fields of life in Turkey since Turkey is in a position of a preferred country in terms of health tourism and many Syrian refugees have settled in Turkey. While culture underlies the life, it involves the values, beliefs, attitudes, and customs of a society. The beliefs, attitudes, and treatment methods of individuals concerning their health and illnesses are influenced by cultures. Culture is regarded as a dynamic factor for health and illnesses. The patient's cultural values, beliefs and applications are an indispensable part of holistic health care. Now, the profession of nursing has revealed the necessity and responsibility of providing individual-centered care to the whole society and ethnic groups in the globalizing world. The quality individual care can be given only when the culture, beliefs, traditions and values of the individual are taken into account as a whole. Leninger, who was the first person to focus on the concept of intercultural nursing in health care. By means of intercultural nursing, Leninger aimed to being sensitive towards individuals and families from different cultures and to provide effective nursing care to them.

The fact that nurses, involving in the center of health care, fail to understand the culture of individuals may result in communication problems, conflicts and discrimination and thus affect the health of individuals adversely. In the study by Tanrıverdi (2015), it was found that 35.2% of the nurses were not aware of the necessity for utilizing the cultural knowledge and skills during the care. In Turkey, based on the study results, it has been found that nursing students experience problems during the care at the rates of 68% and 69.4% due to cultural differences and these problems are associated mostly with communication (a different language). In the study by Tortumluoğlu, Okanlı, Ozyazıcıoğlu, and Akyıl (2006), it was determined that the problems most frequently encountered by students among the cultural differences were related to speaking and beliefs. It was found that students experiencing these problems were unable to provide sufficient care to the patients, and this affected the health of patients adversely. The fact that the nurses have cultural knowledge and communication skills, and reflect them into practice are significant in terms of affecting the care outcomes positively.

It is highly important for nurses to have high cultural sensitivity and awareness while offering care to individuals from different cultures. Intercultural sensitivity has been conceptualized as an individual talent that encourage and support an effective and appropriate behavior for intercultural communication and help to develop positive emotions to tolerate and understand cultural differences. Therefore, extending trainings for increasing cultural sensitivity starting from the nursing students shall increase the effectiveness of the health care. In the study by Ceylantekin and Öcalan (2016), it was indicated that majority of students who took the course “Intercultural Nursing” had different opinions before and after taking the course; after taking the course, they began to approach the topic more sensitively from profession aspect, and the majority of them took into account the cultural characteristics of the patients during the patient care process. In the studies conducted abroad, it has been found that training interventions are effective for developing cultural knowledge.

Providing intercultural training to nursing students constitute an important factor for increasing the cultural sensitivity and communication skills in coping with the problems encountered in school and hospital environments. One of the significant elements of solving communication problems is the ability to develop empathy, empathy is the ability to understand what others think and feel in order to communicate in the right way. It is required for nurses to be aware of the emotions of their patients, manage their own emotions, and develop empathy in order to establish a high communication with their patients. Undoubtedly, education shall serve to teach students fruitfully the ways of...
confronting with the problems, developing empathy, and coping with many problems such as communication problems from their first step into the profession. Therefore, as emphasized by Leninger, training the nurses with cultural sensitivity from the foundation shall provide high quality empathy and care to future nurses for patients. It is expected from individuals with a high level of empathic tendency to have a higher intercultural sensitivity level. By means of the culturally competent empathic approach, the quality of care and satisfaction enhance, the outcomes of health improve; the stress of those giving and receiving care decreases, the burnout of the caregivers decreases and the satisfaction with the health institutions increases.

Determining the cultural sensitivity and empathic tendency levels of the nursing students is significant for providing the training to increase the cultural sensitivity and empathic tendencies of the students, as well as increasing the quality of holistic approaches provided by the nurses to patients and the quality of the care provided. Current research aims to reveal the effectiveness of intercultural nursing education on cultural sensitivity and empathic tendency level among nursing students. The following hypothesis is advanced:

H1: The intercultural nursing training provided to nursing students increases the cultural sensitivity level.

H2: The intercultural nursing training provided to nursing students increases the empathic tendency level.

MATERIAL AND METHOD

Design

This research was a randomized controlled trial (RCT).

Sample

Participants were 1st, 2nd, 3rd and 4th grade students (N=246) enrolled in the nursing department of a university in the east part of Turkey, from September to November 2019. Interested participants were screened by the research team for the following eligibility criteria: (a) students who willingly decided to participate and (b) students who don’t take any education about culture.

The size of the sample was calculated through the G Power program. Statistical power and significant level were taken as 0.95 and 0.05, respectively. The number of samples for both groups was calculated as 35. After completion of baseline measurements, the students were registered and a computer generated list of random number generated by SPSS 21 was used for block randomization. The 124 students were randomly appointed to each group. Two students in both groups withdrew from the research. Sixty participants in the training group (TG) and 60 participants in the control group (CG) remained in the analyses. The power of the research was determined as 0.84 after the post-hoc test result.

Measures

Data Collection Tools

"Social-Demographics Questionnaire (SDQ)", “Intercultural Sensitivity Scale (ISS)”, and “Empathic Tendency Scale (ETS)” were used during the collection of research data. The necessary permissions were obtained from the relevant authors for the use of the scales.

Social-Demographics Questionnaire (SDQ)

The Social-demographics Questionnaire was developed by the research team and consisted of 5 questions to gather knowledge on the students’ sociodemographic characteristics.

Intercultural Sensitivity Scale (ISS)

The ISS developed by Chen and Starosta includes 24 items and five subscales. The adaptation of the scale to Turkish culture was done by Bulduk, Tosun and Ardiç. There is not a cut-off value of the scale. It is a five-point likert-type scale. High scores indicate higher cultural sensitivity. Cronbach’s Alpha (CA) coefficient of the ISS’ Turkish form is
In current research, the CA value was determined as 0.78.

**Empathic Tendency Scale (ETS)**

The scale was developed by Dökmen to determine the empathic tendencies of individuals. It consists of 20 items scored on a five point Likert-type scale. A higher score indicates higher empathic tendency. The points range from 20 to 100. The CA coefficient of the original version was found to be 0.72. In current study, the Cronbach’s value was determined as 0.68.

**Data Collection**

The data collection tools comprised SDQ, ISS, and ETS. The data were gathered mutually interviews made by researchers in two phases. First, pretest forms (SDQ, ISS, and ETS) were applied to evaluate the intercultural sensitivity and empathic tendency level of the TG and CG after making the essential explanations. Then, the TG was provided 2 hours a week for 8 weeks of intercultural nursing education. The researchers applied posttest forms (ISS, and ETS) to both groups during the 8th week after the education program. Completing data took 15-20 minutes on average.

**Intercultural Education Program**

An education program has been developed based on the relevant literature review. The EG were trained in eight sessions of 2 hour each. Each education session was one day per week, 2 hours per session for two months. During the application, the curriculum booklets were given to the participants by the researchers at the end of each session. The sessions were held using group discussions, visual materials, homework, question-answers, feedback, and practices. Education contents were created as pointed in the definition of culture, characteristics of culture, the relationship among health, disease and culture, transcultural nursing models, common features of the models, cultural competence, cultural care, cultural awareness, significance of the cultural nursing care, what empathy is, significance of empathy in nursing care, cultural sensitivity and empathy.

**Data Analysis**

The SPSS Statistic version 23.0 was used to evaluate the data. The control variables among students in the TG and CG were analyzed using independent-samples t test and chi-square test. Paired t test was used to examine the pre- and post test means of the scales. Independent t test was used to examine the pre- and posttest means of the scales among students in both groups. The significance level was determined as p < .05.

**Aspect of Research Ethics**

Necessary permission from the Dean’s Office of the Faculty of regarding the research and Bingöl University Scientific Research and Publication Ethics Committee permission were obtained (dated: 09.01.2019 and numbered: 01). Participants’ personal information and study data were collected according to the Declaration of Helsinki. The researchers received informed verbal and written consent from the participants before starting this study.

**Limitation of The Study**

Data obtained from current study represent the statements of participants included in the research, and the results of the research cannot be generalized.

**RESULTS AND DISCUSSION**

When the descriptive characteristics of both groups are examined; 70% of the CG were female, 60% the place of longest residence was the southern Turkey, 62% of the participants were staying in dormitory and the average age was 20.16 ± 1.23. Of the TG, 63.3% were female, 46.7% the place of longest residence was the southern Turkey 65.0% were dormitory, the average age was 19.82 ± 2.81. It was determined that the difference between the TG and CG was not statistically significant and both groups were homogeneous (p > .05).

The pretest ISS score mean of the TG was 82.15±7.82, while this score was 81.78±6.93
for the CG. The pretest ETS score mean of TG was 67.90±7.10 and 68.21±9.86 in the CG. The difference between the two groups in terms of pre-test mean scores of both scales was statistically insignificant (p>.05 see Table 1).

Table 1. The comparison of pretest ISS and ETS mean scores of TG and CG

<table>
<thead>
<tr>
<th>Scales and Subscales</th>
<th>Training Group (n:60)</th>
<th>Control Group (n:60)</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X±SD</td>
<td>X±SD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interaction Engagement</td>
<td>23,38 ±2,37</td>
<td>22,86±2,11</td>
<td>3,011</td>
<td>.382</td>
</tr>
<tr>
<td>Respect for Cultural Difference</td>
<td>22,66 ±3,93</td>
<td>23,25±3,92</td>
<td>.772</td>
<td>.417</td>
</tr>
<tr>
<td>Interaction Confidence</td>
<td>16,35±1,90</td>
<td>15,96±1,65</td>
<td>.336</td>
<td>.242</td>
</tr>
<tr>
<td>Interaction Enjoyment</td>
<td>11,11± 2,95</td>
<td>10,83±2,21</td>
<td>.062</td>
<td>.553</td>
</tr>
<tr>
<td>Interaction Attentiveness</td>
<td>10,45±1,82</td>
<td>10,10±2,83</td>
<td>2,056</td>
<td>.413</td>
</tr>
<tr>
<td>Total ISS</td>
<td>82,15 ±7,82</td>
<td>81,78±6,93</td>
<td>1,897</td>
<td>.567</td>
</tr>
<tr>
<td>ETS</td>
<td>67,90 ±7,10</td>
<td>68,21 ±9,86</td>
<td>-.202</td>
<td>.840</td>
</tr>
</tbody>
</table>

X: Mean; SD: Standard Deviation; t: Independent t test; p<0.05

According to the post-test results, the mean ISS score of CG was 81.95 ± 7.82 (Table 2). The difference between the pretest score of CG and this score was statistically insignificant (p>.05, Table 3). In contrast, the mean post-test ISS score of the TG was 87.36± 7.24. The difference between the TG pretest score and this score was statistically significant (p<.05, Table 3). The difference in the total score of the ISS posttest mean score between the TG and CG as well as the mean scores of sub-dimensions; regarding interaction engagement, respect for cultural difference and interaction attentiveness were statistically significant (p < .05, Table 2). The TG total scores for ISS and sub-dimensions; regarding interaction engagement, respect for cultural difference and interaction attentiveness were higher than those of the CG.

Table 2. The comparison of posttest ISS and ETS mean scores of TG and CG

<table>
<thead>
<tr>
<th>Scales and Subscales</th>
<th>Training Group (n:60)</th>
<th>Control Group (n:60)</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X±SD</td>
<td>X±SD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interaction Engagement</td>
<td>25,88 ±2,17</td>
<td>22,38±2,37</td>
<td>6,011</td>
<td>.000*</td>
</tr>
<tr>
<td>Respect for Cultural Difference</td>
<td>22,68 ±3,85</td>
<td>22,21±3,90</td>
<td>-.753</td>
<td>.453</td>
</tr>
<tr>
<td>Interaction Confidence</td>
<td>16,40 ±1,89</td>
<td>16,01±1,71</td>
<td>1,162</td>
<td>.248</td>
</tr>
<tr>
<td>Interaction Enjoyment</td>
<td>11,26 ±1,93</td>
<td>10,46±1,79</td>
<td>0,567</td>
<td>.572</td>
</tr>
<tr>
<td>Interaction Attentiveness</td>
<td>11,13±2,89</td>
<td>10,86±2,21</td>
<td>2,343</td>
<td>.021*</td>
</tr>
<tr>
<td>Total ISS</td>
<td>87,36 ±7,24</td>
<td>81,95±7,82</td>
<td>2,483</td>
<td>.004*</td>
</tr>
<tr>
<td>ETS</td>
<td>70,90±11,27</td>
<td>68,41 ±8,86</td>
<td>-.202</td>
<td>.030*</td>
</tr>
</tbody>
</table>

X: Mean; SD: Standard Deviation; t: Independent t test; *p<0.05

According to the post-test results, the mean ETS score of CG was 68.41±8.86. The difference between the pretest score of CG and this score was statistically insignificant (p>.05 see Table 3). In contrast, the mean post-test ETS score of the TG was 70.90±11.27. The difference between the TG pre-test score and this score statistically significant (p<.05 see Table 3). The difference in the total score of the ETS posttest between the TG and CG was statistically significant (p< .05; see Table 2). The TG’s total scores for ETS was higher than score of the CG.
It was observed in the study that before the training, the cultural sensitivity mean score of students in both TG and CG was at moderate level. The research findings are similar to the literature. Çetişli-Egelioğlu et al. found that cultural sensitivity in nursing students was moderate.\(^5\) In another study by Kılıç-Parlar and Sevinç (2017) with nursing students, cultural sensitivity was found to be at moderate level.\(^7\) In the study conducted by Yang (2012) with 276 Korean nursing students, it was revealed that empathy and cultural sensitivity of participants had moderate levels.\(^26\) It was also found in the study by Chang, Yang, and Kuo (2013) on community health nurses that cultural sensitivity was at moderate level.\(^13\) Ister and Altunbaş (2016) also found moderate levels of empathic tendencies for nursing students.\(^23\) In the study by Yiğitbaş, Deveci, Açıkt, Ozan, and Oğuzöncü (2013) that evaluated the empathic tendencies of health education students, ETS mean score of the students was 66.07, ETS mean score of nurses who worked with Özcan (2012) was 65.95, and Avcı, Aydin, and Ozbasaran (2013) stated this mean score as 67.66.\(^{28-30}\) The fact that the cultural sensitivity and empathic tendency of the nurses were at moderate level for nurses makes also us think the necessity of cultural education, as well as the need for increasing the ability for empathy in the trainings to be provided for the students.

Findings from the research shown that there was no difference between the total mean score of the participants in the CG for the cultural sensitivity scale and its subscales and their total mean score of empathic tendency in the posttest compared to the pretest (\(p>0.05\)).

The current research, it was observed that there was an increase in total score average of empathic tendency and cultural sensitivity of the participants in TG in the posttest compared to the pretest. It was found that the difference between the mean scores was statistically significant.

Moreover, current research, it was determined that the empathic tendency and intercultural sensitivity post test mean scores of TG increased when compared to CG, and this increase was significant. This result confirms the hypotheses of “the intercultural education provided to nursing students increases the cultural sensitivity level” and “the intercultural education provided to nursing students increases the empathic tendency level”.

Societies’ gradually transforming into multicultural structures and the necessity of providing culturally specific case in the world

### Table 3. The comparison of ISS and ETS pretests/posttests mean scores of students in training group and control group

<table>
<thead>
<tr>
<th>Scales and Subscales</th>
<th>Training Group (n: 60)</th>
<th>Control Group (n: 60)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X±SD</td>
<td>X±SD</td>
</tr>
<tr>
<td></td>
<td>Pre-test</td>
<td>Post-test</td>
</tr>
<tr>
<td>Interaction Engangement</td>
<td>23.38±2.37</td>
<td>25.88±2.17</td>
</tr>
<tr>
<td>Respect for Cultural Difference</td>
<td>22.66±3.93</td>
<td>22.68±3.85</td>
</tr>
<tr>
<td>Interaction Confidence</td>
<td>16.35±1.90</td>
<td>16.40±1.89</td>
</tr>
<tr>
<td>Interaction Enjoyment</td>
<td>11.11±2.95</td>
<td>11.26±1.93</td>
</tr>
<tr>
<td>Interaction Attentiveness</td>
<td>10.45±1.82</td>
<td>11.13±2.89</td>
</tr>
<tr>
<td>Total ISS</td>
<td>82.95±7.82</td>
<td>87.36±7.24</td>
</tr>
<tr>
<td>ETS</td>
<td>67.90±11.27</td>
<td>70.90±7.10</td>
</tr>
</tbody>
</table>

| Interaction Engangement               | 22.86±2.11            | 22.38±2.37            |
| Respect for Cultural Difference       | 23.25±3.92            | 22.21±3.90            |
| Interaction Confidence                | 15.96±1.65            | 16.01±1.71            |
| Interaction Enjoyment                 | 10.83±2.21            | 10.46±1.79            |
| Interaction Attentiveness              | 10.10±2.83            | 10.86±2.21            |
| Total ISS                             | 81.78±6.93            | 81.95±7.82            |
| ETS                                   | 68.21±9.86            | 68.41±8.86            |

\(X: \text{Mean}; \ SD: \text{Standard Deviation}; \ t: \text{Paired test}; \ *p<0.05\)
has affected considerably nursing. It is gradually becoming significant to train nurses having cultural knowledge and abilities that are able to meet the cultural needs of societies. In the study by Ceylantekin and Öcalan (2016), it was revealed that majority of students taking the course of “intercultural nursing” had different opinions before and after taking the course; and after taking the course, they had a more sensitive approach to the topic and the majority took into account the cultural characteristics of the patient in the process of patient care. According to the study by Prosen (2015) among students taking the course of transcultural nursing in the postgraduate nursing program transcultural nursing concepts increased their experiences in practice and constructing such knowledge on the formerly acquired clinical experiences increased their cultural awareness. Sürmeli Karaca, Cirban, and Hançer (2017) stated that the cultural sensitivity of nurses who took courses and training on culture is higher than those who did not receive training.

In the study made by Noble, Rom, and Noble (2014) on nursing students in Israel, it was found that training increased cultural sensitivity and sensitivity. In the study conducted by Chen and Starosta (2000) to develop the scale for intercultural sensitivity, it was stated that empathy is an important element of the intercultural sensitivity. Cetişli et al. (2016) found a positive correlation between the empathy levels and intercultural sensitivity levels of nursing students. 

The current research results showed that intercultural training was effective in increasing the intercultural sensitivity and empathic tendency level and enabling the students to acquire empathy skills. Based on the study results, it can be asserted that the cultural sensitivity and empathic tendency of the TG increased following the education.

CONCLUSION AND RECOMMENDATIONS

To conclude, it was observed that the empathic tendencies and cultural sensitivity of the participants in the CG and TG were at moderate level before the education. Following the education, on the other hand, there was an increase in the empathic tendency and cultural sensitivity of the participants in the TG. In accordance with these results, it may be recommended for trainings to be organized from the first step of the profession in order to provide effective interaction between the patient and the nurse, cultural sensitivity and empathic tendency.

REFERENCES


