Original research

Enhancing undergraduate nursing curricula to cultivate person-centred care for culturally and linguistically diverse older people

Kathleen Markey a,⁎, Brid O’ Brien a, Claire O’ Donnell a, Catherine Martin b, Jill Murphy a

a Department of Nursing and Midwifery, Faculty of Education and Health Sciences, Health Research Institute, University of Limerick, Ireland
b School of Modern Languages & Applied Linguistics, University of Limerick, Ireland

A B S T R A C T

With an ageing global community and widening socio-cultural diversity, nurse educators are increasingly challenged to align responsive undergraduate nursing curricula to rapidly changing healthcare environments. In future-proofing nurse education, educators need to collectively examine ways of interconnecting and developing gerontological and cultural competence within undergraduate curricula. However, there is limited guidance as to how this can be achieved in already compacted curricula. We suggest that this could be achieved by critically examining undergraduate curricula to make explicit how they can be adapted to educate nurses in the provision of culturally competent person-centred care. This approach could help nurse educators adapt student nurse preparation to meet the needs of culturally diverse older people and their families.

1. Introduction

Like many countries, Ireland is experiencing a growing inward migration trajectory and a rising ageing population, exceeding any previous trends. Statistics show that net inward migration in Ireland has increased from 59,000 in 2013 to 337,000 in 2019, with non-Irish nationals now representing over 12% of the population (Central Statistics Office, 2019). This aligns with international trends, as migration to Europe has increased from 57million to 82million between 2000 and 2019 (United Nations, 2019). Health care organisations are seeing a broadening socio-cultural diversification of healthcare professionals and patients and their families accessing healthcare services. The challenges with adapting caring practices in response to cultural needs (Markey et al., 2019) and working in intercultural healthcare teams are widely reported (Andonian and Rossenblum, 2017).

People are also living longer and culturally and linguistically diverse older adults represent a growing proportion of changing demographics (World Health Organization, 2018). However, deficits in nursing care provided to this cohort (Soderman and Rosendahl, 2016; Gillham et al., 2018) and their families (Johnstone et al., 2016), warrants attention. There is growing evidence to highlight the challenges of caring for older people and their families (Koskinen et al., 2015; Soklaridis et al., 2016) and culturally and linguistically diverse patients (Kouven et al., 2018; Markey et al., 2020). The term cultural and linguistic diversity (CALD) refers to the diversity of different cultures and language groups represented in the patient population (Department of Health and Human Services, 2014). The need for culturally safe and quality person-centred approaches to care for CALD older people is identified as an urgent necessity (Wang et al., 2018). Person-centred care has been previously advocated by Nolan et al. (2006), who argued for the inclusion of relationship-centred care (RCC) in ensuring both older people and their families’ needs are met (Soklaridis et al., 2016). Nolan et al. (2006) draws attention to the importance of everyone feeling a sense of security, belonging, continuity, purpose, achievement and significance. Although the importance of such philosophies of care are clearly identified, student and registered nurses continue to experience difficulties caring for CALD older adults and their families (Soklaridis et al., 2016; Gillham et al., 2018; Wang et al., 2018). This highlights the importance of addressing reported deficits in undergraduate nurse education in the areas of cultural competence (Fors et al., 2019; Hultsjo et al., 2019) and gerontological nursing (Koskenen et al., 2015; Coffey et al., 2017). Aligning nurse education with the changing realities facing nursing practice within a global community is essential. Although beyond the scope of this paper, providing opportunities for students to learn to work within intercultural teams also warrants attention as the nursing workforce is becoming increasingly culturally diverse (Kouven et al., 2018). Nurse educators must also examine undergraduate curricula and educational pedagogies, making explicit how the capability for cultivating a workforce that can respond appropriately to the needs of CALD older people and their families can be achieved. However, there is

⁎ Corresponding author.

E-mail addresses: kathleen.markey@ul.ie (K. Markey), brid.obrien@ul.ie (B. O’ Brien), claire.odonnell@ul.ie (C. O’ Donnell), Catherine.Martin@ul.ie (C. Martin), jill.murphy@ul.ie (J. Murphy).

https://doi.org/10.1016/j.nepr.2020.102936
Received 24 October 2019; Received in revised form 9 September 2020; Accepted 19 November 2020
Available online 25 November 2020
1471-5953/© 2020 The Authors. Published by Elsevier Ltd. This is an open access article under the CC BY license (http://creativecommons.org/licenses/by/4.0/).
limited guidance on how this may be accomplished in an already overloaded curriculum. This paper proposes some practical approaches in preparing nursing students for providing respectful and responsive care for CALD older people and their families.

1.1. Culturally competent person-centred considerations

Student nurses’ attitudes to nursing older people (Koskinen et al., 2015) and CALD patients and their families (Forss et al., 2019) are dependent on the level of theoretical and practical preparation in the curriculum. Standards for nurse education (European Commission, 2013; Nursing and Midwifery Board of Ireland, 2016), stipulate the need for a more person-centred philosophy when caring for the older person and their families. Nevertheless, nursing students continue to report gaps in the educational preparation received to care for older people and their families (Kydd et al., 2014; Hsieh and Chen, 2018). The ageing process is both ‘socially constructed’ and ‘culturally embedded’ (King et al., 2017), highlighting the importance of understanding the diversity of characteristics within the ageing trajectory across CALD communities. However, student and registered nurses experience difficulties when caring for CALD older people (Lood et al., 2014; Wang et al., 2018).

Developing gerontological and cultural competence collectively in nursing curricula is now essential in future-proofing nurse education. Addressing ageist attitudes (Kydd et al., 2014; Wilson et al., 2017) and cultural stereotypes and prejudices (Larson et al., 2017; Hultsjo et al., 2019), within nurse education is core. Although models of care for cultural competence (Papadopoulos et al., 2016) and person-centredness (Mc Cormack and McCance, 2017) are welcome developments, these are often utilised in isolation rather than interconnected elements of curricula. Campinha-Bacote (2011) and Papadopoulos et al. (2016) highlight the need for a culturally competent approach in enhancing the delivery of person-centred and culturally safe care. In comparing conceptual models of cultural competence and patient centeredness, Saha et al. (2008) and Campina-Bacote (2011) argue that despite focusing on different aspects of quality care, seeing the uniqueness of the patient and their needs, is core to both. Approaches to nurse education that examine these constructs together, whilst also nurturing ‘age friendly’ and ‘culturally safe’ philosophies of care are essential in preparing students in providing care to CALD older people and their families. Drawing on commonalities between cultural competence and person-centred frameworks informs curricula design and pedagogical approaches that cultivate age-friendly and culturally safe practice (Table 1).

1.2. Developing awareness

Developing awareness captures the importance of understanding the self and cultural awareness synchronously. Shepherd et al. (2019) seeks education interventions that acknowledge the value of developing cultural awareness when planning person-centred care. However, the need to address ageist attitudes and cultural stereotyping is paramount (Wilson et al., 2017; Larson et al., 2017). Nursing students need opportunities to think about their personal and cultural values, whilst considering how they affect their understanding of providing culturally safe, respectful and responsive care for CALD older adults and their families. Huang et al. (2011) advocates for a conducive environment that is intolerant to ageism and supports staff in providing age-friendly healthcare. The use of portfolios, reflection and journaling are important strategies for understanding one’s values, which helps address ageist attitudes, and cultural stereotyping. However, reflection used in isolation is ineffective in decreasing unconscious biases (Schuultz and Baker, 2017). Facilitating opportunities for students to express their views, attitudes and prejudices in a safe environment, whilst acknowledging how they impact on caring encounters, is paramount. Nurse educators need to appreciate the value of such discussions in engaging students in meaningful and relevant learning, whilst being open and non-judgemental.

1.3. Understanding values and beliefs

Nurse educators need to provide opportunities for students to examine their personal and professional values, whilst exploring how they impact on understanding cultural beliefs of others (Markey and Okanay, 2019). Replacing traditional pedagogies with innovative approaches that are more reflective of the changing healthcare environment is essential. The use of art work (De Vecchi et al., 2019) and drama (Arvekleve et al., 2018) are effective educational approaches for examining values and beliefs. Providing opportunities for students to explore CALD older adult narratives and co-created practice scenarios is recommended. Engaging with ‘culturally diverse age experts’ in curricula design can help focus learning and teaching approaches that consider culturally responsive person-centred care (Jansky et al., 2019). Providing opportunities to engage with CALD older adult support groups and clinical placements or opportunities to live in residential aged care facilities, encourages the development of empathy, through intergenerational interaction and intercultural solidarity (Corrigan et al., 2013; Arentshorst et al., 2019). Intergenerational interaction is an approach that can lead to improved understanding, whilst encouraging students to see the older person and their families as active participants in care delivery (Hwang et al., 2013). It is also effective in combating ageism as it gives students the perspective of older adults where the interaction between generations have been minimal (Arentshorst et al., 2019).

1.4. Fostering relationships

Fostering trusting and respectful relationships with CALD older people and families is core to developing therapeutic relationships (Nolan et al., 2006). Opportunities for students to consider the influences of ethnicity, gender, class, sexuality and age in how patients engage in therapeutic conversations is needed in respecting individuality. The family plays a crucial role in CALD communities. For example, cultural norms and religious beliefs inform decision making roles within the family, highlighting the importance of ensuring families are integral in planning care. However, the needs of families of CALD older people are often unmet (Schaffler et al., 2019). Family support for older adults varies across cultures, highlighting the importance of educational programmes which address the needs of relatives and staff (Sokludis et al., 2016). This requires an understanding of the influence of culture in how verbal and non-verbal expressions are communicated. Opportunities must be provided for students to reflect on their own communication style and language and consider how they can impact on developing therapeutic relationships with CALD older people and their families. Educational interventions that encourage simulation, intercultural engagement and role-playing cross cultural caring scenarios, help with understanding and respecting differences with communication styles, modes and language (Chai and Kim, 2018).

2. Conclusion

Developing gerontological and cultural competence collectively, is paramount in preparing nursing students to provide culturally safe and
responsive care for CALD older adults and their families.

Contributions
All authors contributed to the drafting and finalising of the manuscript preparation.

Funding
No specific grant from any funding agency in the public, commercial, or not-for-profit sectors was received.

Declaration of competing interest
The authors declare no conflict of interest.

Appendix A. Supplementary data
Supplementary data to this article can be found online at https://doi.org/10.1016/j.nepr.2020.102936.

References
Andonian, L., Rossenblum, R., 2017. Faculty led study abroad: influences on student script preparation.
Contributions - Arentshorst, M.E., Kloet, R.R., Peine, A., 2019. Intergenerational housing: the case of Hwang, H.L., Wang, H.H., Lin, H.S., 2013. Effectiveness of supervised intergenerational Hultsjö, S., Bachrach-Lindstorm, M., Safipour, J., Hadziabdic, E., 2019. Cultural Hsieh, P.-L., Chen, C.-M., 2018. Geriatric nursing and long term care content in European Commission, 2013. Directive 2013/55/EC of 20 November 2013 on the recognition of professional qualifications. Amendment to directive 2005/36/EC of the European Union L354, 132-170. Forss, K.S., Persson, K., Borglin, G., 2019. Nursing students experiences of learning about nursing through drama. Nurse Educ. Pract. 28, 60-65. Campinha-Bacote, J., 2011. Delivering patient-centred care in the midst of a cultural conflict: the role of cultural competence. Online J. Issues Nurs. 16 (2), 1. https://doi.org/10.3912/OJIN.Vol16No02Man05. -1. Central Statistics Office, 2019. ‘Census of population 2020 – preliminary results.’ Retrieved from: Ireland. www.cso.ie/en, accessed 05/02/20. Coffey, A., Savage, E., Leahy-Warren, P., Mulcahy, H., Wills, T., McCarthy, V., Fehin, P., Ö Doibhlin, D., McLaughlin, K., Benefield, L.E., O’ Sullivan, B., Hegarty, J., 2017. Systematic Literature Review and National Focus Groups to Support the Development of a Strategic Vision and Educational Framework for Gerontological Nursing. Health Service Executive, Dublin, Corrigan, T., McNamara, G., O’ Harra, J., 2013. Intergenerational learning: a valuable learning experience for higher education students. Eur. J. Educ. Res. 52, 117-126. Department of Health and Human Services, US Office of Minority Health, 2014. National standards for culturally and linguistically appropriate services in health and healthcare. Retrieved from: https://www.thinkculturalhealth.hhs.gov.pdfs/inhalnacdNationalCLASStandards.pdf . Accessed on March 2020). De Vecchi, N., Kenny, A., Dickson-Swift, V., Kidd, S., 2018. Continuing professional development in mental health: promoting dialogue and reflection through art. Nurse Educ. Pract. 32, 34-36. European Commission, 2013. Directive 2013/55/EC of 20 November 2013 on the recognition of professional qualifications. Amendment to directive 2005/36/EC of the European parliament and of the council. Directive, Brussels. Official Journal of the European Union L354, 132-170, 2013. Fors, K.S., Persson, K., Borglin, G., 2019. Nursing students’ experiences of caring for ethnically and culturally diverse patients, A scoping review. Nurse Educ. Pract. 37, 97-104. Gillham, D., De Bells, A., Xiao, L., Wills, E., Harrington, A., Morey, W., Jeffers, L., 2018. Using research to inform staff learning needs in cross cultural communication in aged care homes. Nurse Education In Practice 63, 18-23. Hsieh, P.-L., Chen, C.-M., 2018. Geriatric nursing and long term care content in Baccalaureate nursing programs in Taiwan. Int. J. Gerontol. 12, 52-56. Hultsjö, S., Bachrach-Lindstorm, M., Safipour, J., Hadziabdic, E., 2019. Cultural awareness requires more than theoretical education, nursing students experiences. Nurse Educ. Pract. 39, 75-79. Huang, A.R., Larente, N., Morais, J.A., 2011. Moving towards the age-friendly hospital: a paradigm shift for the hospital-based care of the elderly. Canadian geriatrics journal: CGJ 14 (4), 100. Hwang, H.L., Yang, H.H., Lin, H.S., 2013. Effectiveness of supervised intergenerational service learning in long-term care facilities on the attitudes, self-confidence, and caring behaviours among nursing students: a quasi-experimental study. Educ. Gerontol. 39 (9), 655-668. Jansky, M., Owusu-Bokye, S., Nauck, F., 2019. ‘An odyssey without receiving proper care’ – experts’ views on palliative care provision for patients with migration background in Germany. BMC Palliat. Care 28 (8), 1-10. Johnstone, M.J., Hutchison, A., Rawson, H., Redley, B., 2016. Nursing strategies for engaging families of older immigrants hospitalised for end-of-life care: an Australian study. Journal of Patient Experiences 3 (3), 57-63. King, R., Liddle, A., Sampalo, S., Vullnetaj, J., 2017. Unpacking the aging-migration nexus and challenging vulnerability tropes. J. Ethnic Migrat. Stud. 43 (2), 182-198. Kouvner, C., Djukic, M., Jun, J., Fletcher, J., Fatemi, F.B., Brewer, C.S., 2018. Diversity and education of the nursing workforce 2006-2016. Nurs. Outlook 66, 160-167. https://doi.org/10.1016/j.outlook.2017.09.002. Koskine, S., Salminen, L., Stolt, M., Leino-Kilpi, H., 2015. The education received by nursing students regarding nursing older people: a scoping literature review. Scand. J. Caring Sci. 29, 15-29. Kydd, A., Touhy, T., Newman, D., Fagerberg, I., Engstrom, G., 2014. Attitudes towards caring for older people in Scotland, Sweden and the United States. Nurs. Older People 26 (2), 33-40. Larsson, K., Mathews, F., Torres, E., Lea, S.C., 2017. Responding to health and social needs of ageing Latinos in new-growth communities: a qualitative study. BMC Health Serv. Res. 17, 661. Lood, Q., Ivaonoff, S., Dallenborg, L., Martensson, L., 2014. Health-promotion in the context of ageing and migration: a call for person-centred integrated practice. Int. J. Integrated Care 14 (3), 1-11. Marky, K., Okantey, C., 2019. Nurturing cultural competence in nurse education through a values-based learning approach. Nurse Educ. Pract. 38, 153-156. Marky, K., Tiilik, M., Taylor, G., 2019. Resigned indifference: an explanation of gaps in care for culturally and linguistically diverse patients. J. Nurs. Manag. 27 (7), 1462-1470. Marky, K., Tiilik, M., Taylor, G., 2020. Practicalities in doctorate research of using grounded theory methodology in understanding nurses’ behaviours when caring for culturally diverse patients. Nurse Educ. Pract. 44 https://doi.org/10.1016/j.nep.2020.102751. Early view. McCormack, B., McCance, T., 2017. In: Person Centred Practice in Using Health Care: Theory and Practice, second ed. Wiley/Blackwell, Chichester. Nolan, M., Brown, J., Davies, S., Nolan, J., Ready, J., 2006. The sexes framework: improving care for older people through a relationship-centred approach. In: Getting Research into Practice (GRiP) Report No 2. Sheffield University, Sheffield, UK. 2006. Available from: http://shura.shu.ac.uk/280/1/PDF_Semexes. Nursing and Midwifery Board of Ireland, 2016. In: Nursing Registration Programmes Standards and Recommitments, fourth ed. Nursing and Midwifery Board of Ireland, Dublin, Papadopoulos, I., Shea, S., Taylor, G., Pezzella, A., Foley, L., 2016. Developing tools to promote culturally competent companion, courage, and intercultural communication in healthcare. Journal of Compassionate Health Care 3 (2), 1-20. Saha, S., Beech, M.C., Cooper, L., 2008. Patent centeredness, cultural competence and healthcare quality. J. Natl Med Association 100 (11), 1275-1285. Schuultz, P., Baker, J., 2017. Teaching strategies to increase nursing student acceptance and management of unconscious bias. J. Nurs. Educ. 56 (11), 662-696. Schaffler, J.L., Tremblay, S., Lai, L., Lambert, S., 2019. Developing education materials for caregivers of culturally and linguistically diverse patients: insights from a qualitative analysis of caregivers’ needs, access and understanding of information. Health Expect. 22, 444-456. Shepherd, S.M., Willis-Equida, C., Newton, D., Sivasubramaniam, D., Paradys, Y., 2019. The challenge of cultural competence in the workplace: perspectives of healthcare providers. BMC Health Serv. Res. 19, 135. https://doi.org/10.1186/s12913-019-3959-7. Soklaridis, et al., 2016. Relationship-centred care in health: a 20-year scoping review sophie Soklaridis patient experience journal. Spring 3 (1), 130-145. Soderman, M., Rosendal, S.P., 2016. Caring for ethnic older people living with Dementia – experiences of nursing staff. J. Cross Cult. Gerontol. 31, 311-326. United Nations, 2019. Department of Economic and Social Affairs, Population Division. World Population Prospects 2019. https://population.un.org/wpp/, accessed 05/05/20. Wang, Y., Dongxia Xiao, L., Yan, P., Yasheng, A., 2018. Nursing students’ cultural competence in caring for older people in a multicultural and developing region. Nurse Educ. Today 70, 47-53. World Health Organization, 2018. Health of older refugees and migrants: technical guidance. In: Copenhagen: WHO Regional Office for Europe; (Technical Guidance on Refugee and Migrant Health). Available at http://www.euro.who.int/__data/assets/pdf_file/0003/386562/elderly-eng.pdf?ua=1. Wilson, D., Murphy, J., Nam, M.A., Victorino, J.P., Gondim, E.C., Low, G., 2017. A critical review of published research literature reviews on nursing and healthcare ageism. J. Clin. Nurs. 26, 23-24.