Difficulties in delivering nursing care to foreign patients among Japanese registered nurses

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AIM

- **background:** Number of foreign visitor and resident has been on a rise recently. Twenty million foreigners visited Japan in 2015. It is urgent necessary for Japanese society to develop cultural competence among nurses to provide culturally safe and proper care to patients who have various cultural background.
- **aim of this study :** to clarify difficulties among Japanese nurses when they deliver nursing care to foreign patients.

METHODS

- **design:** descriptive questionnaire survey
- **subject:** registered nurses from nineteen hospitals in Japan
- **tool and material:** questionnaire consisted of self-descriptive cultural competence scale and an open-end question asking difficulties for delivering nursing care to foreign patients as free description; content of the response to the open-end question was material
- **period of data collection:** from September to December in 2015
- **data analysis:** extracting concept by text mining using SPSS Text Analytics for Surveys 4.0.1 Japanese version

RESUTLS

- **subject:** number of targets for survey was 9,140 including staff nurses, chief, head and director of nursing department. 7,592 (83%) subjects responded. 4,738(51.8%) among them described their clinical difficulties in delivering nursing care (Fig. 1).
- **content of difficulties in delivering nursing care to foreign patient:**
  - top 50 extracted by appearance frequency (table 1).
  - most of top 10 concepts were of communication (table 1 & Fig. 2)
  - web graphs indicates concepts found together in data and lines between concepts indicates its frequency (Fig. 3-5).
  - respondents thought that their "nursing care" had "insufficiency" and "inaccuracy" due to communication and cultural barrier (Fig. 4).
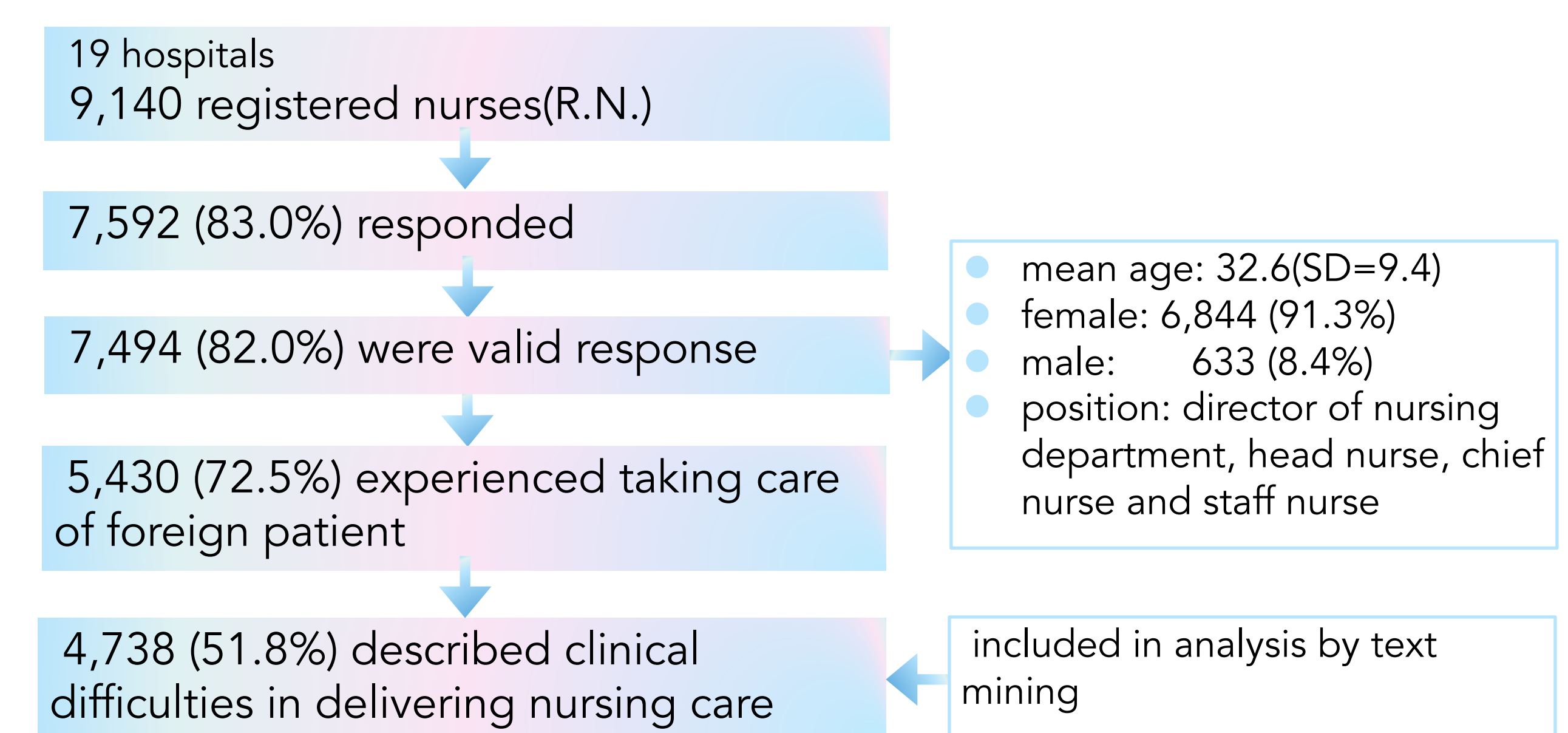 - "nervous" mentioned not only of R.N. also foreign patients (Fig. 5)

19 hospitals
9,140 registered nurses(R.N.)

7,592 (83.0%) responded

7,494 (82.0%) were valid response

5,430 (72.5%) experienced taking care of foreign patient

4,738 (51.8%) described clinical difficulties in delivering nursing care

- mean age: 32.6(SD=9.4)
- female: 6,844 (91.3%)
- male: 633 (8.4%)
- position: director of nursing department, head nurse, chief nurse and staff nurse

included in analysis by text mining

Fig. 1 respondents

Table 1 top 50 concepts as difficulties, its number of respondents and percentage
(*multiple response)

#	category	n	%	#	category	n	%
1	communication	2736	57.7	26	pain	113	2.4
2	language	2669	56.3	27	listening	113	2.4
3	incomprehensible language each other	1842	38.9	28	barrier	108	2.3
4	English language	639	13.5	29	insufficiency	102	2.2
5	Japanese language	577	12.2	30	medical examination	84	1.8
6	difference	465	9.8	31	surgical operation	77	1.6
7	explanation	438	9.2	32	recognition	77	1.6
8	understanding	353	7.5	33	medical treatment	76	1.6
9	culture	334	7.0	34	point of view	75	1.6
10	gesture	327	6.9	35	guidance and education	74	1.6
11	medical and nursing terminology	249	5.3	36	confirmation	72	1.5
12	interpreter	245	5.2	37	inaccuracy	54	1.1
13	symptom	224	4.7	38	physician	51	1.1
14	patient's complain	183	3.9	39	information	47	1.0
15	food and diet	178	3.6	40	smell	43	0.9
16	family	169	3.6	41	asking	39	0.8
17	foreigner	160	3.4	42	special request	37	0.8
18	life style and habit	156	3.3	43	observation	36	0.8
19	treatment and response	154	3.2	44	kanji or Chinese character	33	0.7
20	nervous	153	3.2	45	creativity	33	0.7
21	religion	147	3.1	46	order	31	0.7
22	nursing care	141	3.0	47	health care	30	0.6
23	time	118	2.5	48	rule	29	0.6
24	nuance	117	2.5	49	value	26	0.5
25	patient's feeling	117	2.5	50	self advocacy	24	0.5

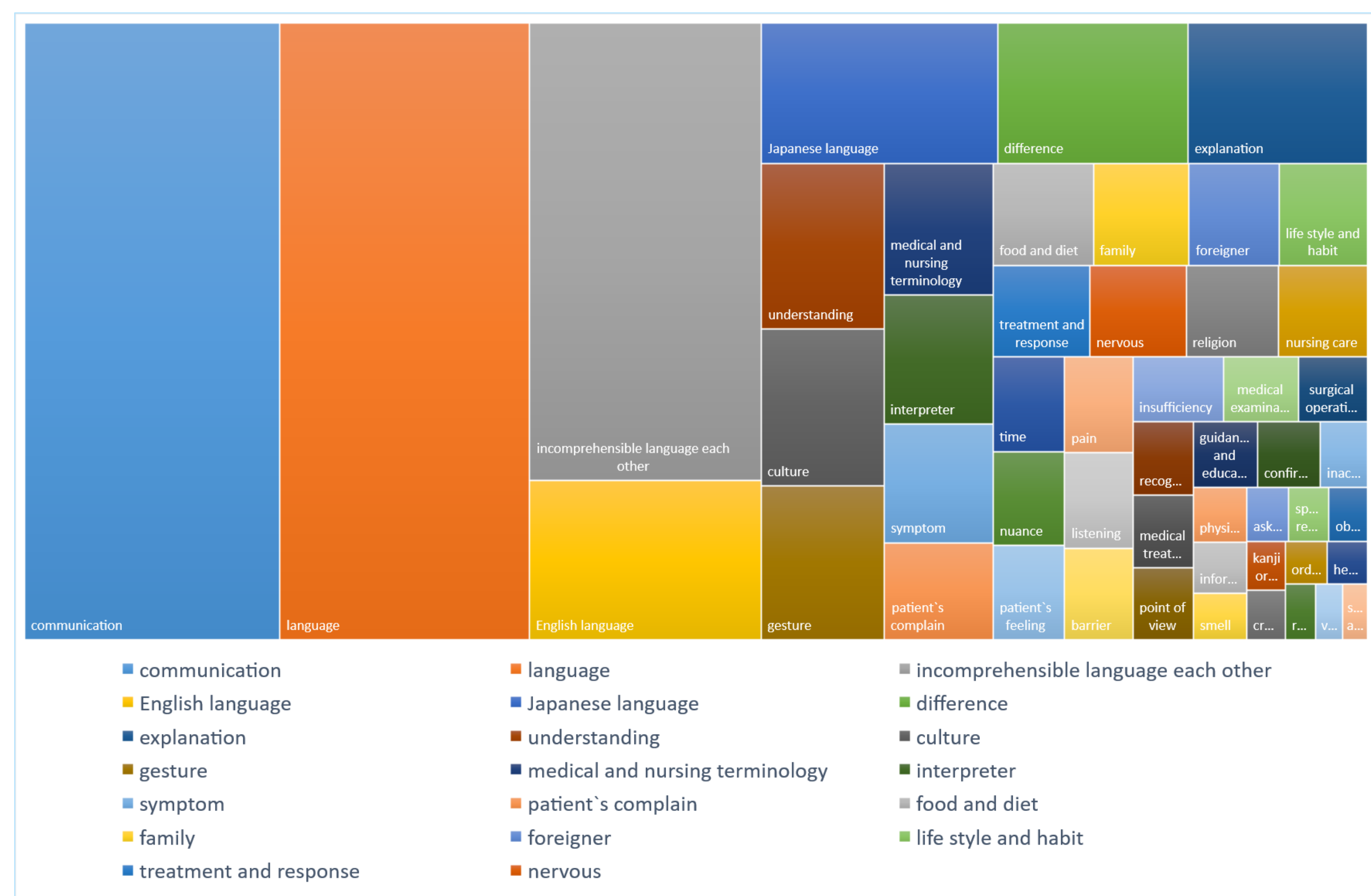areas shows frequency of categories respectively (*multiple response)

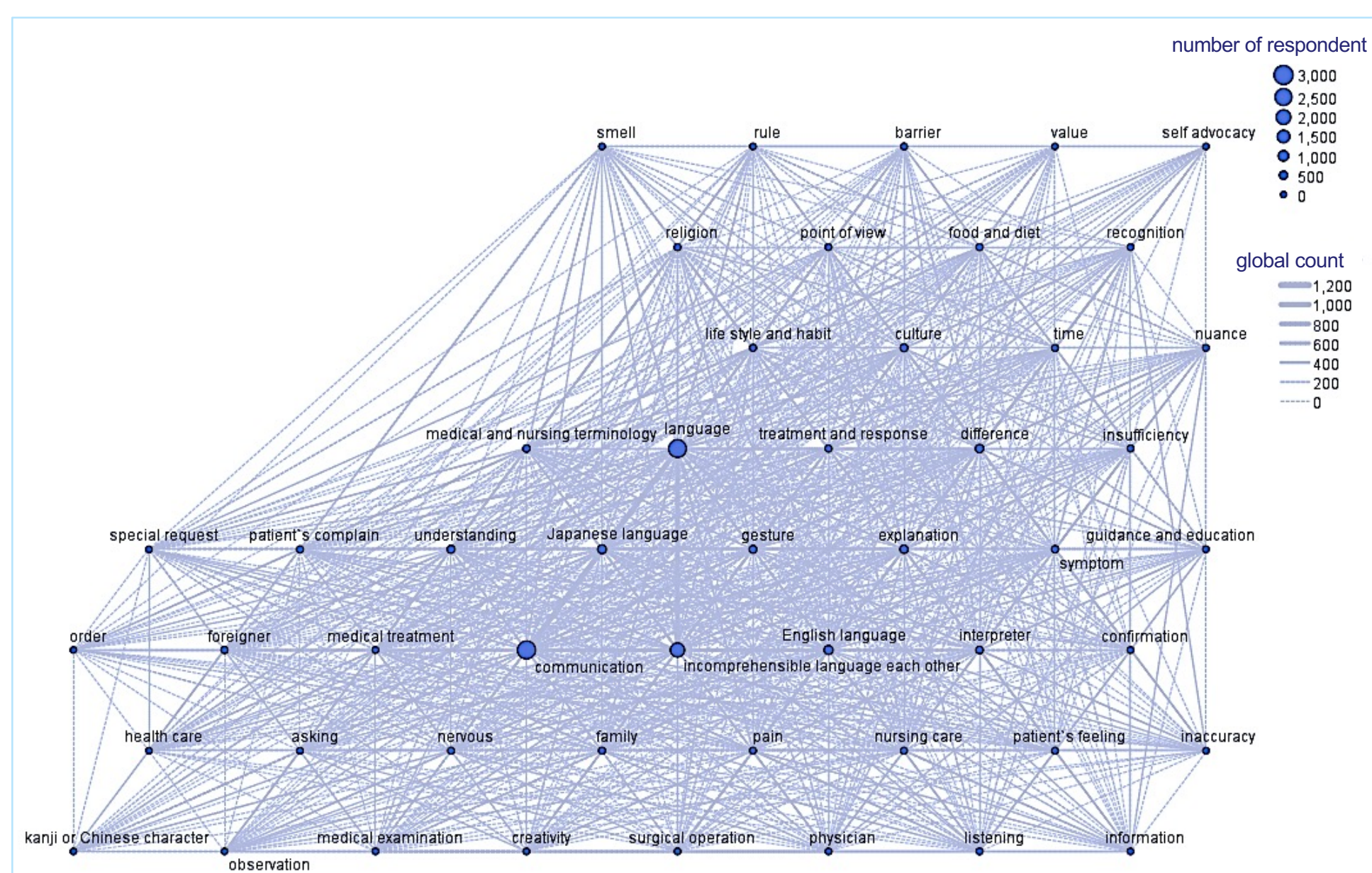Fig. 2 tree map of top 50 categories

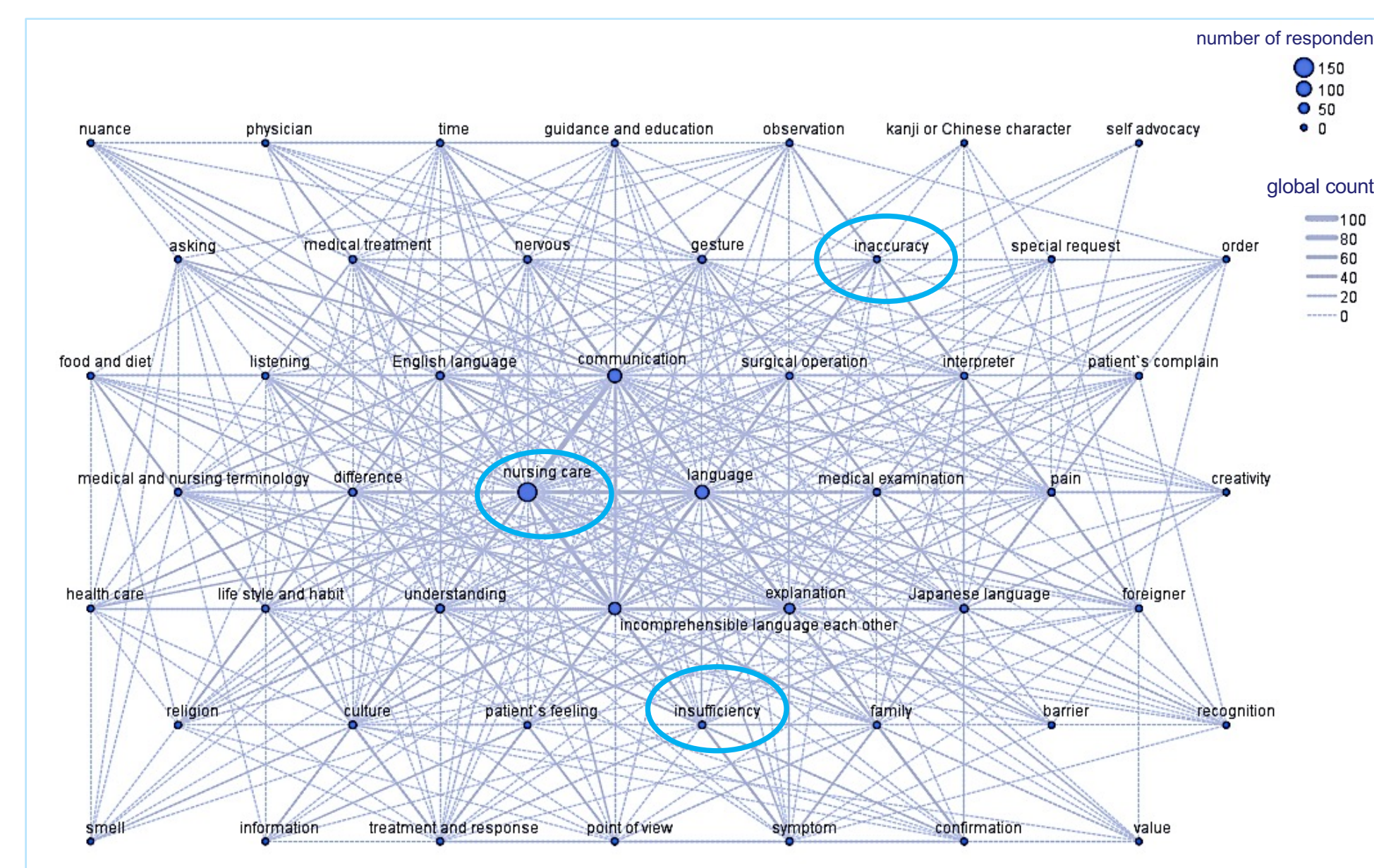

Fig. 3 web graph of top 50 categories
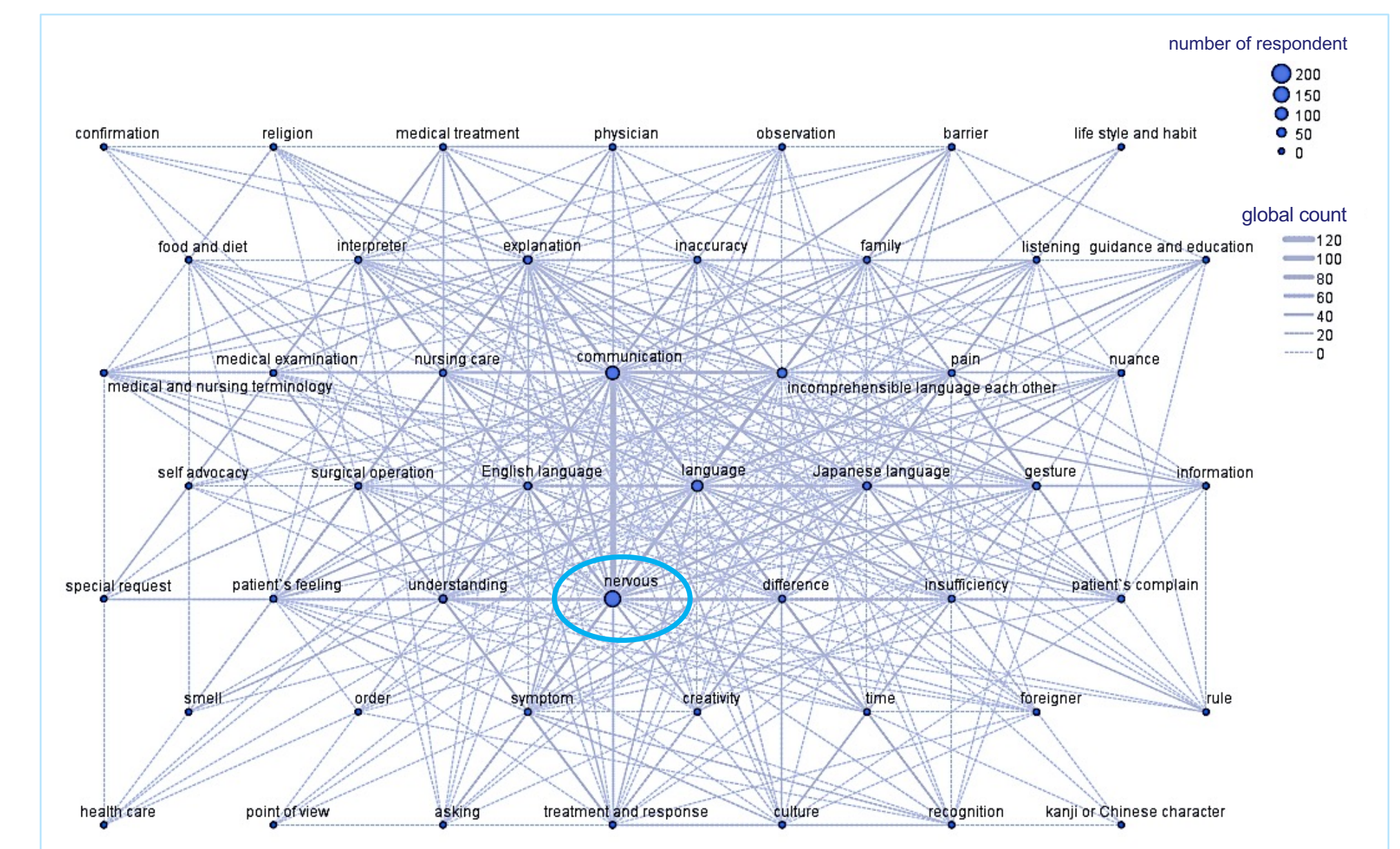

Fig. 4 web graph of "nursing care"

Fig. 5 web graph of "nervous"

DISCUSSION

- Language is a great barrier for Japanese nurses in delivering nursing care to foreign patients.
- Also cultural factors effected delivering nursing care and cause "inaccuracy" and "insufficiency" as hazards of clinical safety.
- Linguistic and cultural interpreting resources are needed for clinical safety for both of nurses and foreign patients.