

Measuring the cultural competence of Japanese nursing students using the Cultural Awareness Scale

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PURPOSE

Nurses are required to be culturally competent in response to increased diversity due to globalization. Nursing education is important for cultivating cultural competence among nurses, but this issue has not been well assessed in Japan. It is unclear what kind of educational support is required for enhancing cultural competence among nursing students. This study aims to clarify the competence of nursing students.

METHODS

The study was designed as a cross-sectional study. A questionnaire survey was conducted with fourth-year students at two nursing schools in Japan using the Japanese version of the Cultural Awareness Scale (CAS), which was prepared with the developer's permission. The CAS contains 36 items using a 7-point Likert scale (1=strongly disagree to 7=strongly agree) and 5 subscales (Table 1). Data were collected from April to July 2015. The study was approved by the ethical committee at Chiba University Graduate School of Nursing.

RESULTS

Of 122 responses (62.6%), 119 were validated and analyzed (113 women, 6 men, mean age, 22.1 ± 3.8 years). About 73.0% of students had taken courses addressing international or foreign culture and 95.8% had taken courses in foreign languages. Cronbach's alpha coefficient for the total scale was .83.

The mean scores for subscales were: (1) 4.49 ± 0.73 ; (2) 5.02 ± 0.97 ; (3) 4.33 ± 0.88 ; (4) 4.05 ± 0.81 ; and (5) 4.76 ± 0.84 . Compared with Rew's data, who developed original CAS (Rew, et al. 2003), mean scores for all subscale were lower than those for American nursing students (including graduate students) (Figure 1).

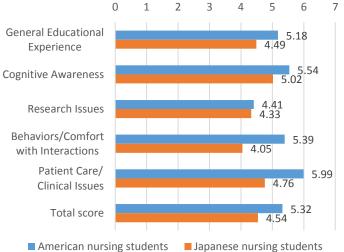


Figure 1. Differences in CAS subscale scores between Rew's data and Japanese nursing students. Negative items were reversed.

Table 1. Average items scores of Japanese nursing students

for the CAS.		
Subscale	Items	Mean±SD
Subscale	The instructors at this nursing school adequately address multicultural issues in nursing.	4.55±1.25
General Educational Experience	This nursing school provides opportunities for activities related to multicultural affairs.	4.90±1.32
	Since entering this nursing school, my understanding of multicultural issues has increased.	4.50±1.53
	4. My experiences at this nursing school have helped me become knowledgeable about the	4.21±1.31
	health problems associated with various racial and cultural groups. 14. During group discussions or exercises, I have noticed the nursing instructors make efforts	
	to ensure no student is excluded.	4.87±1.49
	16. In my nursing classes, my instructors have engaged in behaviors that may have made students from certain cultural backgrounds feel excluded. *	2.67±1.64
	18. My instructors at this nursing school seem comfortable discussing cultural issues in the classroom.	4.34±1.35
	19. My nursing instructors seem interested in learning how their classroom behaviors may discourage students from certain cultural or ethnic groups.	3.31±1.34
	21. I believe the classroom experiences at this nursing school help students become more comfortable interacting with people from different cultures.	4.55±1.34
	22. I believe some aspects of the classroom environment at this nursing school may alienate students from some cultural backgrounds. *	2.74±1.46
	24. My clinical courses at this nursing school have helped me become more comfortable interacting with people from different cultures.	3.63±1.54
	25. I feel that the instructors at this nursing school respect differences in individuals from diverse cultural backgrounds.	4.95±1.29
	26. The instructors at this nursing school model behaviors that are sensitive to multicultural issues.	4.34±1.22
	27. The instructors at this nursing school use examples and/or case studies that incorporate information from various cultural and ethnic groups.	4.07±1.41
Cognitive	5. I think my beliefs and attitudes are influenced by my culture.	5.16±1.55
	6. I think my behaviors are influenced by my culture.	5.37±1.47
	7.Ioftenreflectonhowcultureaffectsbeliefs, attitudes, andbehaviors.	4.21±1.59
	11. I believe nurses' own cultural beliefs influence their nursing care decisions.	5.17±1.31
	15. I think students' cultural values influence their classroom behaviors. (e.g., asking questions, participating in groups, offering comments.)	4.91±1.43
	17. I think it is the nursing instructor's responsibility to accommodate students' diverse	5.42±1.19
	learning needs. 20. I think the cultural values of the nursing instructors influence their behaviors in the clinical setting.	4.88±1.28
Research Issues	38. The faculty at this nursing school conducts research that considers multicultural aspects of health-related issues.	4.34±1.14
	29. The students at this nursing school have completed theses and dissertation studies that considered cultural differences related to health issues.	4.32±1.20
	30. The researchers at this nursing school consider relevance of data collection measures for	4.35±1.05
	the cultural groups they are studying. 31. The researchers at this nursing school consider cultural issues when interpreting findings	4.32±1.04
	in their studies. 8. When I have an opportunity to help someone, I offer assistance less frequently to	
Behaviors/	individuals of certain cultural backgrounds. *	2.64±1.23
	9. I am less patient with individuals of certain cultural backgrounds. *	3.15±1.32
	 10. I feel comfortable working with patients of all ethnic groups. 12. I typically feel somewhat uncomfortable when I am in the company of people from 	2.80±1.49
	cultural or ethnic backgrounds different from my own. *	4.61±1.34
	13. I have noticed that the instructors at this nursing school call on students from minority cultural groups when issues related to their group come up in class. *	3.77±1.36
	36. I feel somewhat uncomfortable working with the families of patients from cultural backgrounds different than my own. *	4.35±1.39
Clinical Issues	23. I feel comfortable discussing cultural issues in the classroom.	3.56±1.33
	32. I respect the decisions of my patients when they are influenced by their culture, even if I disagree.	5.33±1.23
	33. If I need more information about a patient's culture, I would use resources available onsite. (e.g., books, videotapes.)	5.26±1.19
	(e.g., books, videotapes.) 34. If I need more information about a patient's culture, I would feel comfortable asking people I work with.	5.08±1.34
	35. If I need more information about a patient's culture, I would feel comfortable asking the patient or family member.	4.59±1.50
* negatively phrased		

^{*} negatively phrased.

CONCLUSION

The mean scores of cultural competence for Japanese nursing students were lower than those for American nursing student because their scores of "general educational experience" were lower, and probably because the cultural context of Japanese society appears to be largely a monoculture with few opportunities to experience other cultures. According to our prior study, Japanese students who had traveled abroad scored higher than students who had not; therefore, to improve cultural competence it may be necessary to provide students with more opportunities to experience other cultures.