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Cultural Immersion Experiences to Enhance Undergraduate Student Nurses Cultural Competency: A Literature Review

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Cultural Immersion Experiences to Enhance Undergraduate Student Nurses

Cultural Competency: A Literature Review

Daniel B. Smith

A scholarly paper submitted to the faculty of
Brigham Young University
in partial fulfillment of the requirements for the degree of
Master of Science

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ABSTRACT

Cultural Immersion Experiences to Enhance Student Nurses Cultural Competency: A Literature Review

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Purpose: The purpose of this review is to explore current literature on cultural immersion experiences for nursing students.

Background: The population of the United States (U.S.) is becoming increasingly diverse. It is estimated that the number of minorities living in the U.S. will increase to 50% of the population by 2050. However, the nursing workforce is not representative of the general population, and many nurses report feeling unprepared to care for patients from different cultures. The need for cultural competency is apparent.

Methods: CINAHL and MEDLINE were searched for articles that address nursing student cultural immersion experiences. Inclusion criteria were publication between 2004 and 2019, available in English, and a focus on immersion experiences for undergraduate nursing students. Abstracts and articles were reviewed for content and relevancy and 35 articles met inclusion criteria for this review.

Results: Main themes for study findings were preparation, in-country experiences, and effects of cultural immersion experiences. Most cultural immersion programs offered classroom orientation content. Popular preparation topics included an introduction to religious customs, beliefs, food, and native language(s). In-country learning activities focused on healthcare-related hands-on involvement and recreational, cultural endeavors. Immersion experiences increased student empathy and allowed students to discover respect for differences in language and culture. Cultural immersion experiences continued to impact and affect nursing care years later.

Discussion: Cultural immersion experiences provide students an opportunity to learn about diverse cultures in a non-threatening environment. Nursing programs should require all students to have the advantage of participating in an immersive cultural experience.

Conclusion: Cultural competency and cultural sensitivity are vital elements of quality nursing care. Immersion experiences provide a superb opportunity for developing cultural competency.

Clinical Recommendations: Students need formal preparation about the country and culture they will be traveling to before the experience. Formal learning should take place two to three weeks before travel.

Keywords: cultural competency, culturally competent care, nursing students, nursing education, international education

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Cultural Immersion Experiences to Enhance Student Nurses

Cultural Competency: A Literature Review

The population of the United States (U.S.) is becoming increasingly diverse. Indeed, in 2000 one-third of the U.S. population identified as a minority (Suh, 2004). However, in 2010 minority populations grew to 38% reflecting an 8% growth, and Hispanic groups accounted for 16% of the population and are projected to continue to grow (Curtin, Martins, Schwartz-Barcott, DiMaria, & Ogando, 2013). It is estimated that the number of minorities living in the U.S. will increase to 50% of the population by 2050 (Long, 2016).

The nursing workforce is not representative of the general population. In 2000, 90% of the nursing workforce identified as non-Hispanic white (Suh, 2004). And in 2013, 75.4% of the nursing workforce identified as non-Hispanic white (U.S. Department of Health and Human Services, 2013). The striking difference in diversity of the general population compared to the relative homogeneity of healthcare workers may lead to challenges in communication and cultural understanding between nurses and patients.

Poor communication and lack of cultural understanding may result in patients receiving substandard care. Deficiency in care leads to increased cost for patients, increased burdens on healthcare systems, and poor patient outcomes (Kohlbray, 2016). These difficulties demonstrate an ever-increasing need for culturally sensitive and culturally competent nurses who can provide care for the communities they serve (Kaddoura, Puri, & Dominick, 2014).

Defining cultural competency and cultural sensitivity is critical to the discussion of culturally competent nurses and the process of gaining competency. Cultural sensitivity is an understanding that each person's cultural background affects his/her attitudes, values, beliefs, and shapes the way a person views the world (Robinson, Bowman, Ewing, Hanna, & Lopez-

DeFede, 1997). Cultural sensitivity is gained through self-reflection of attitudes and beliefs (Kratzke & Bertolo, 2013). Understanding and recognizing cultural differences and finding value in those differences are hallmarks cultural sensitivity.

Likewise, cultural competency can be defined as the development of self-awareness, cultural awareness, and respect for cultural differences. The development of these skills and abilities allows healthcare providers to work effectively with patients/people with different beliefs, values, and customs (Bettencourt, Green, & Carillo, 2002). Developing cultural competency is an ongoing process that includes exposure to and the study of different cultures, beliefs, and values (Long, 2016; Suh, 2004).

The need for cultural competency is becoming more apparent. However, many nurses report feeling unprepared to care for patients of different cultures. Nurses have cited lack of cultural competency education and lack of exposure to diverse cultures as reasons for feeling unprepared (Markey, Tilki, & Taylor, 2018). Teaching cultural competency needs to begin long before a nurse cares for his/her first patient. In 2003 the American Associations of Colleges of Nursing (AACN) identified the need for cultural competency in baccalaureate nursing education. AACN. Even recently Repo, Vahlberg, Salminen, Papadopoulos, and Leino-Kilpi (2017) suggest that nursing schools include cultural competency components in curricula. The American Nursing Association and the AACN require cultural competency to be taught as part of nursing curricula (Kohlbray, 2016).

Although a variety of teaching tools have been utilized, there is not a consensus on which methods to use in teaching cultural sensitivity and cultural competency. Each technique has inherent advantages and disadvantages. Teaching cultural competency in the classroom allows teachers to reach more students and costs less when compared to traveling to a foreign country to

immerse students in a new culture. However, cultural immersion and direct exposure to other cultures is the most effective way for students to gain cultural awareness and begin to develop cultural competency (Ferranto, 2013). In light of this understanding, some nursing programs offer immersion experiences to students to enhance cultural learning. Cultural immersion is defined as an experience where a student engages with a culture that is different from his or her own (Long, 2012). Cultural immersion affords students the opportunity to experience a new country or countries and encounter different people, customs, foods, and language.

Researchers have attempted to report and quantify how cultural immersion experiences affect nursing students. The purpose of this review is to explore current literature on cultural immersion experiences for nursing students. This review will add to the discussion of cultural immersion as a method of teaching cultural competency as well as offer suggestions for practice.

Methods

CINAHL and MEDLINE were searched for articles that address the effect of nursing student cultural immersion experiences and how those experiences affect future nursing practice. Inclusion criteria required that undergraduate nursing students participate in a cultural immersion experience in country other than own. Articles also were required to include the outcomes of an immersion experience on nursing practice. The search criteria included publication in English from 2004 to 2019. Keywords used included *nursing AND cultural immersion AND effect OR impact OR influence OR outcomes* resulting in 100 articles after duplicate articles were rejected. A review of the title and abstract decreased the results to 41. Complete articles were then thoroughly examined for content and relevancy to this topic. 35 articles met inclusion criteria: 29 studies, three scholarly papers, and three literature reviews.

Results

A variety of elements have been reported as noteworthy factors in researching cultural immersion experiences. Cultural immersion programs vary in student preparation, learning activities, and the effects on students.

Student Preparation

Preparation for immersion experiences varied widely by program. Preparation was reported to be as short as one day, while other programs reported spending a full semester learning about the culture and in other preparation activities. Learning activities to prepare students for the experience included seminars and lectures about the country or culture. Attendance in learning activities was mandatory in some programs while optional in others (Curtin et al., 2013). In short, there was no consensus as to the best way to prepare for an immersion experience nor a standard length of time for the preparation for an immersion experience (Philips, Bloom, Gainey, & Chiocca, 2017).

Although there are no standards of preparation for an immersion experience, current literature revealed common topics and activities among immersion programs. Most cultural immersion programs offered classroom lectures, seminars, and online learning to orient students to the culture they would experience (Long, 2012; Lipson & DeSantis, 2007). Classroom education included lectures from a person of an ethnic minority, case studies, and group discussions (Harkess & Kaddoura, 2016). Online learning activities included digital discussion boards, access to recorded lectures, PowerPoint presentations, links to transcultural videos, and links to relevant websites (Harkess & Kaddoura, 2016; Long, 2012; Lipson & DeSantis, 2007).

Immersion preparation included a variety of topics that would help prepare students. Popular preparation topics included an introduction to religious customs, beliefs, food, and

native language(s). Students were also educated about the political climate of the country and local healthcare systems (Amerson, 2014). Also, students were taught personal skills and strategies on how to interact with locals to bridge cultural and language barriers (Hutchins, DiPrete Brown, & Poulsen, 2014). Self-assessment was done to identify each student's level of cultural competency before the experience in hopes of maximizing cultural growth (Harrowing, Gregory, O'Sullivan, Lee, & Doolittle, 2012).

In-country Learning Activities

Comparable to preparation there is little consensus as to what activities should be included while in-country during a cultural immersion experience. Learning activities designed to teach cultural competency varied widely by program and location of the immersion experience. Student activities included working in clinical settings, attending formal lectures, teaching health promotion, traveling to rural areas, as well as recreational activities (Ferranto, 2013). Nearly every program reported that student nurses worked with patients in local healthcare systems in both public and private hospitals (Smith & Curry, 2011). Students were paired with local nursing staff who taught about daily life and health-related challenges of patients in each setting (Ulvund & Mordal, 2017). Working with native nursing staff allowed students to gain experience on a variety of units including medical/surgical, mother baby, and pediatrics (Gower, Duggan, Dantas, & Boldy, 2017). Students were given opportunities to participate in education for local populations about health-related topics, such as illness prevention, disease identification, and hand hygiene (Larson, Ott, & Miles, 2010).

Student nurses also had the opportunity to travel to remote areas of a country to work in local clinics and see firsthand the consequences of limited access to healthcare (Smith & Curry, 2011). Traveling to remote areas exposed students to the challenges of poverty for people living

in rural areas. During these visits, students were also introduced to local uses of alternative forms of medicine including plants, herbs, massage, and spiritual healings performed by a medicine man or shaman (Erkel, Nivens, & Kennedy, 1995; Hutchins et al., 2014; Stone et al., 2014).

However, not all student learning focused on clinical experiences. The purpose of some learning opportunities was to expand student exposure and understanding of the culture they were visiting (Ruddock & Turner, 2007). Some programs had students attend formal lectures given on culture, medicine, and community health taught by local guest lecturers or university faculty (Long, 2016). In some instances, cultural learning was done through local organizations who had natives teach students about customs, political environments, and daily life (Ulvund & Mordal, 2017). Students also toured art galleries, attended music concerts, visited shopping markets, street vendors, and participated in weekend excursions (Curtin et al., 2013; Diesel, Ercole, & Taliaferro, 2013). Students reported that being present in another culture while learning about that culture increased knowledge retention and appreciation while living and studying abroad (Diesel et al., 2013).

Along with activities included during in-country experiences, educators should also consider how long immersion experiences should last. Evanson and Züst (2004, 2006) reported that undergraduate nursing students showed increased cultural competency from immersion experiences that lasted only 1-week. While Bentley and Ellison (2007) reported increased cultural knowledge after an 8-day immersion experience. Research findings have suggested that students who participated in immersion experiences longer than 2-weeks did not show differences in cultural competencies than students who participated in longer immersion experiences (DeDee & Stewart, 2003; Haloburdo & Thompson, 1998). Haloburdo and

Thompson (1998) also suggest that immersion experience that last longer than 2-weeks may create a barrier to student participation. Amerson (2014) suggests that experiences that are longer than two weeks do not increase competency, but that design of in-country activities may be more important than length of immersion experiences.

Effects of Cultural Immersion Experiences

Additionally, researchers have reported positive student experiences, personal growth, and a shift in global perspective as a result of cultural immersion. While some researchers indicated that immersion experiences positively influence students, other researchers report little or no gains in cultural competency.

Positive student experiences. Researchers reported that immersion experiences positively influenced students (Philips et al., 2017). Immersion experiences increased student empathy, student ability able to see from another's perspective, and resulted in a newfound respect for differences in language and culture (Long, 2016; Maltby & Abrams 2009; Mu et al., 2016). Additionally, researchers reported that students felt immersion experiences were valuable (Philips et al., 2017). Students reported feeling more comfortable speaking to and interacting with people of different cultures (Ulvund & Mordal, 2017).

Personal growth. Along with reporting that experiences were valuable, another common theme was personal student growth. Immersive experiences introduced students to other cultures and different ways of thinking (Koskinen & Tossavainen, 2004). The recognition of these differences helped students become comfortable with other cultures and become aware of similarities and differences among cultures. Students reported the increase in awareness resulted in a greater appreciation for diversity and increased personal growth (Curtin et al., 2013).

Shifts in global perspective. Students who went on cultural immersion experiences reported having a broader view of the world after the experience. The cultural competency of each student before the immersion experience varied on prior personal experiences with other cultures. Some students had extensive experiences interacting with other cultures while others had little or no experience. While pre-immersion competency varied, Hoffart, Diani, & Carney (2015) suggest that some students report increased understanding of the political and social economics of the country they visited as a result of the immersion experience.

Additionally, immersion experiences challenged personal beliefs for some students. Students recognized the unique perspectives of the host culture and even regarded aspects as superior to the student's native culture (Philips et al., 2017). This paradigm shift was in contrast to previous beliefs that students' native culture was superior to all others (Diesel et al., 2013). Recognizing value in other cultures led students to begin to develop cultural awareness and cultural competency (Philips et al., 2017). Students reported these increases in cultural competency were a direct result of the immersion experience (Hoffart et al., 2015; Ulvund & Mordal, 2017).

Effects lasted beyond experiences. Cultural immersion experiences have lasting effects on students, new graduates, and practicing nurses. Nursing students who participated in immersion experiences felt more prepared to care for patients of different cultures and felt more comfortable caring for patients when language barriers were present (Allen, Smart, Odom-Maryon, & Swain, 2013; Long, 2016). Students reported using language skills gained during the immersion experience when working with patients (Allen et al., 2013). With the gains made in developing competency, nursing students reported a realization of how little they knew. This

realization led to an increased desire to learn about cultures and increase personal cultural competency (Harrowing et al., 2012).

Similarly, recent graduates reported that immersion experiences made a difference in their lives both professionally and personally (Hutchins et al., 2014). Indeed, DeDee and Stewart (2003) reported that international experiences made lasting impacts in “knowledge of international and transcultural issues, reassessment of your outlook on your life in the United States, and interaction with people from other cultures” (p. 242). Cultural competency was significantly higher in more recent graduates. Recent graduates also reported increased awareness of global health issues, especially when caring for patients from a culture they participated in via an immersion experienced (Ter Maten & Garcia-Maas, 2009).

Nurses, who had worked for a range of 1 to 34 years and had a cultural immersion experience reported using cultural competency skills in everyday practice (Hoffart et al., 2015). Nurses understood that it might be difficult to communicate information to patients when encountering culture or language barriers. Having a cultural immersion experience helped nurses understand patient perspectives. Thus, nurses could tailor teaching to meet patient needs. Nurses reported having less preconceived notions of other cultures and increased empathy (Hoffart et al., 2015). Nurses also reported having better relationships with co-workers of a different culture due to the increased ability to understand the perspective of others (Hoffart et al., 2015). Additionally, nurses reported having an increased willingness to interact with and care for patients from different cultures as a result of immersive cultural experiences (Amerson, 2014). Hence, cultural immersion experiences continued to impact and affect nursing care and how nurses treat people of different cultures years later.

Little or no gain in cultural competency. Contrarily, merely engaging in a cultural immersion experience did not guarantee a student would begin cultural competency development (Hutchins et al., 2014). Exposure to new cultures is only the beginning of learning competency. Cultural immersion experiences can be a starting point for students, but developing cultural competency is an ongoing effort and must be continued.

While many researchers have reported gains in cultural competency as a result of an immersion experience (Philips et al., 2017), others have suggested that cultural gains were merely modest (Harrowing et al., 2012). Indeed, some researchers reported no difference in pre-post- cultural competency scores (Kohlbray, 2016). Furthermore, Kohlbray (2016) noted some students rated their post-experience competency lower than the pre-trip survey. The lack of cultural sensitivity or cultural competency gains during or after cultural immersion experiences may be attributed to students beginning to understand how little they knew about other cultures and hubris before travel (Kohlbray, 2016). For example, the more students learned about culture, the less they felt they knew about that particular culture (Philips et al., 2017).

The lack of student gains in competency may also be attributed to culture shock (Ter Maten & Garcia-Maas, 2009; Hutchins et al., 2014). Students who attended cultural immersion experiences may have been overwhelmed by local poverty, living conditions, and lack of resources, which negatively influenced their ability and desire to learn about the country and culture they visited. Feeling overwhelmed by these conditions not only affects learning during the immersion experience but may also make it difficult for students to learn and apply cultural competency in the future (Hutchins et al., 2014). Due to the potential of immersion programs to overwhelm students, it is essential to provide time during and after immersion to allow students

to process what they have experienced. Students need time to reflect on experiences and solidify gains made in cultural competency (Hoffart et al., 2015).

Discussion and Recommendations

Although students reported that experiences were worthwhile, educators should carefully consider how to incorporate findings into practice. Instructors should consider the length of time required and type of activities to include in preparation for immersion experiences. Careful consideration of the time spent as well as learning activities the program will utilize while in-country should also be considered. Finally, careful planning of how to enhance the effects of the cultural experience should be considered.

Preparation

Length of time allotted for preparation and preparation content should both be considered while creating preparation material.

Length of preparation time. There is no consensus regarding the amount of time devoted to preparation for immersion experiences. Furthermore, there is no evidence that any particular length of preparation is optimal. Hence, future research should be conducted to analyze what length of time would provide sufficient depth for student learning and beginning to engage in cultural competency.

Preparation content. Preparation for immersion experiences also varied (Amerson 2014). Students have deeper understanding and more profound experiences with greater preparation, although more time intensive (Kruse & Brubaker, 2007). Students need formal education about the country and culture they will be traveling to prior to the experience. Education should give students the opportunity to be informed about the many aspects of a new culture. Student nurses will encounter unfamiliar foods, language, government, religions,

customs, and healthcare systems. Having formal education will help alleviate culture shock when they arrive in the country and allow for increased cultural learning. Students need exposure to the foods they will encounter, having students sample foods before entering the country will give students an understanding of what type of diet they can expect.

Nursing students who may experience a foreign language should have some exposure to the native language where they will travel. Language is “an integral part of culture-specific information” (Kruse & Brubaker, 2007, p. 148). Hence, Students need some elemental language skills or exposure to help adapt to a new culture. While it is not realistic to expect students to become proficient in the language, learning a few phrases may enhance communication with native populations. Attempting to communicate in the host language will build relationships as students show a willingness to engage in the host culture (Jirwe, Gerrish, & Emami, 2010). Struggling to communicate in a foreign language may also build empathy with future patients when language barriers make communication difficult.

Methods of instruction and orientation to languages vary. Students may begin to learn the language they will encounter through flashcards of key phrases and commonly used vocabulary words. A native speaker may be utilized to introduce students to the language they will encounter. Conversational phrases and correct pronunciation may be taught by this native speaker. Another option would be the use of language learning apps such as Duolingo. Basoglu and Akdemir (2010) report that mobile apps can be more effective as a language learning tool than traditional vocabulary tools. These apps are inexpensive, readily available, and students could use on their own time.

Other topics covered in preparation education include an introduction to the local government, religions in the area, local customs, and music. Preparation should include

information about the city or community where they will stay as well as housing that is typical of the area. Further teaching should consist of information about the population including demographics. Students should also be taught about local healthcare systems, what healthcare is available, and accessibility issues.

Formal learning for cultural immersion experiences should take be provided as close to travel as possible, thus allowing learning to be fresh in the minds of the students when they arrive in country. Preparation classes could be taught by nursing faculty who will be traveling with students. The majority of the classes could take place on the college campus to ease student and faculty burden for attendance. The length of time educating on each topic may vary. However, faculty should regularly evaluate how much time is spent in a classroom and in cultural preparation activities and lectures to ensure education requirements are being met (Kruse & Brubaker, 2007). Proper education will arm students with the knowledge to make the experience more valuable.

In-Country Learning Activities

Students need a variety of experiences in-country to allow full exposure to native languages and cultures. Students need formal academic experiences as well as casual experiences to make learning about culture effective (Rudduck & Turner, 2007). Student placements in local hospitals and clinics provide the opportunity to work with local nurses. Working with local nurses may allow students the opportunity to appreciate differences between the local healthcare system and the healthcare system of the students' home country. Working with local nurses also provides students the opportunity to interact closely with someone who lives in that country and gives opportunities that cannot be gained by merely observing nursing care. Students learning is enhanced when they engage with local people, including direct client

contacts, during their study abroad (Koskinen & Tossavainen, 2004). Clinical experiences are one of the more valuable experience for increasing student cultural awareness and competence (Long, 2012).

As an example of a potential schedule for an immersion program the author suggests the following. The first week of the immersion experience could be spent working in the hospital with local nursing staff. Student could spend either three 12-hour shifts or possibly five 8-hour shifts depending on the staffing of the local hospital. Nursing students need multiple days in the hospital as it is challenging to gain an understanding of nursing care in another culture in one shift (Long, 2012).

The second week of the experience should focus on out-of-hospital care. Student nurses should spend a day participating in home health visits. Home health visits allow students to see living conditions and to interact with patients in a home setting (Koskinen & Tossavainen, 2004). In addition, three days could be spent traveling to rural areas. Visits to under-served towns and villages expose students to micro-cultures within the country and to areas that are prone to poverty. Nursing students could also teach health prevention during these three days. Topics could include personal hygiene, diet, and dental care (Larson et al., 2010). This schedule would allow for weekends and a few days in between nursing shifts to explore the culture of the country in non-health care settings (Erkel et al., 1995).

Beyond focusing solely on healthcare, student learning activities could include lectures by a native of the country/culture about local communities and customs. Understanding local customs will help students connect to the new culture (Evanson & Zust, 2004). Students should engage in local recreational activities. Students should be encouraged to attend cultural events

such as plays, sporting events, and local markets. Encouraging students to participate in non-healthcare related outings will broaden cultural learning.

Length of In-country Experiences

The length of time of the immersion experience can also affect cultural competency development. Semester-length immersion experiences increase cultural familiarity but may be difficult for many colleges and schools of nursing to participate in, due to the time and money necessary to live abroad for a semester. The costs associated with daily expenses to support faculty could prove prohibitive to many nursing programs. However, research has shown that short-term, less than 3-week, immersion experiences can improve student cultural competency (Bentley & Ellison, 2007; Evanson & Zust, 2004, 2006; Haloburdo & Thompson, 1998). Short-term immersion experiences allow students to become acquainted with both languages and cultures. Students also may begin to understand what it is like to live in that culture (Amerson, 2014). Faculty should consider the design of in-country experiences and length of in-country experiences to maximize student participation in immersion experiences.

Enhancing Effects of Immersion Experiences

Cultural immersion experiences have been reported to be influential in developing cultural competency; however, the effects of cultural immersion experiences should be reinforced. Indeed, traveling to another country and being exposed to a different culture is just the beginning of developing cultural competency. And, while time spent in another culture is valuable, students should begin the experience with the understanding that they will not emerge experts in the culture they visited (Philips et al., 2017). Students need to continue to cultivate competency skills as cultural competency is a lifelong pursuit that will never be completed (Hutchins et al., 2014).

Educators can enhance cultural learning for students by include journaling while in country, writing reflective papers about experiences after returning home, developing and fostering relationships with people in the host country before, during and after experiences, and sharing insights with other undergraduate nursing students. Journaling is an excellent way to enhance the effects of immersion experiences through reflection. Journaling encourages students to express thoughts and feelings. Journaling about the experience can help solidify gains made in cultural competency. Assigned writing prompts, related to events and outings help students link previous expectations with current experiences (Larson et al., 2010).

Other ways to encourage continued interest in learning cultural competency would be to facilitate students in cultivating relationships established during trips and maintaining those relationships after returning home (Sachau, Brasher, & Fee, 2010). Prior to the experience, students could begin to develop relationships with individuals in the country they will be visiting. Students may be given contact information of nursing students in the country they will be visiting in a 'pen pal' format. Student can begin to share information about each other's culture through video conferencing, Skype, email, or regular mail. (Sachau et al., 2010). Students could spend time with native students in a social setting such as a B-B-Q or potluck dinner. Students from each culture could bring food from their culture to share. Such activities would introduce different foods and cultural aspects in a fun and relaxed setting.

A final suggestion for enhancing cultural immersion is post-travel presentations (Curtin et al., 2013). Students share personal stories and provide feedback to faculty and funding organizations. To enhance recruitment for programs student could also share experiences and photos with other nursing students who may be interested in participating in an immersion experience in the future. Having the opportunity to teach and share individual experiences will

solidify cultural gains, while also helping prepare other students to learn cultural competency (Curtin et al., 2013).

Conclusion

Cultural competency and cultural sensitivity are vital elements of quality nursing care. Cultural immersion experiences are one avenue that can begin the process of learning cultural competency and cultural sensitivity. Hence, cultural immersion should be made available to all nursing students during an undergraduate program. Further research on cultural immersion is needed to identify the optimal length of preparation time and in-country experiences. Additionally, the effects of immersion experiences can be enhanced by daily reflective journaling, maintaining relationships with students of the other culture, and post-travel presentations. Culturally competent nursing care is vital for diverse populations, and immersion experiences provide a superb opportunity for developing cultural competency.

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