

TEXAS WOMAN'S UNIVERSITY

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Advancing Undergraduate Nursing Students' Knowledge and Sensitivity to Culture and Diversity

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ABSTRACT

Nurses have long identified that culture and diversity are important for clinical practice. A review of the content of an undergraduate nursing program informed faculty members from a metropolitan university in the Dallas Fort Worth area that topics of culture and diversity were not scaffolded to provide an adequate foundation for ongoing student learning. Undergraduate students enrolled represented great diversity, about a third of each class included either minority or international students. An important first step involved creating awareness about one's personal perspectives and sensitivity to personal bias and prejudice.

An interdisciplinary committee (i.e., nursing, physical therapy, student life, psychologist) was formed and met to the development of an cultural emphasis to over four semesters for nursing students. The intent was to identify active learning opportunities that offered opportunities to advanced knowledge and sensitivity. The vision is to alter student engagement with one another on campus and better prepare them for clinical practice in workplace environments.

LEARNING OBJECTIVES

Learning Objectives:

- Students will examine personal beliefs, values, biases and prejudices.
- Students personal self-awareness about the ways privilege and oppression operate in society will be enhanced.
- Students awareness that other's experiences of privilege and oppression may differ from theirs.

METHODS

A Paper Chain learning activity was selected as the organizing learning activity. Faculty volunteers were identified and participated in a 60-minute diversity training activity. A pre-work assignment to view a video and complete a brief reading offered junior 1 students ways to think about their personal responses before the activity day.

The student group was divided into 10 teams with 6member each. Two teams were assigned to a classroom. Teams received a bag of supplies with instructions. They had 20 minutes to work together and create a paper chain. They were told that the team with the best chain would win a

One team received an elaborate (privileged) amount of materials while the other team (oppressed) was given minimal supplies. Two room facilitators role played assignments to either *supportive* or *unsupportive* roles. Supportive example comments: "You can do it?" "Great Job." "Wow, you are amazing." Unsupportive examples: "Hurry up." "Try harder." "That's not very good." Why can't you do better?" Facilitators were allowed to take supplies away from group to highlight how luck/privilege can change. However, they could make no other comments.

DEBRIEFING

At the end of the experience, faculty facilitators assisted small classroom groups to debrief by asking questions to assist understandings and process emotions and experiences. Example questions: "What was this experience like for your?" "How did you feel?" "did anyone wonder what was happening in the other space?" "How did you feel toward the facilitators?" At the end of debriefing sessions, groups chose a spokesperson to share themes from the experience with the larger class group.





At the final debriefing, two facilitators spent about 30 minutes with students as they shared personal stories about daily struggles with

culture and diversity.

FINDINGS

Nursing students (n = 104) participated in the diversity experience. Using a survey a scale of 0 to 10 with 10 being the highest, 79.8% rated the event as an 8 or better and 75.0% reported being challenged to explore how diversity concepts applied to them as individuals. Participants (85.2%) said they learned how a personal cultural lens could influence their clinical work. Of those participating, 83.5% said that self-awareness of personal bias was a starting point for being a culturally competent practitioner. Qualitative questions were answered to identify unique concerns linked with the activity. In reporting the positives about the experience most liked enjoyed the interactivity of the total. Many noted that they liked hearing their peers personal reflections.



The reports of the least enjoyed aspects of the event included the time length of the experience and the lack of special content relevant to specific cultures and nursing practice. Several noted that they were uncertain about what to expect in the experience and felt personally uncomfortable with some of the topics. Three students said they were unhappy with the personal bias about politics observed during the presentation.

DISCUSSION

Overall the students enjoyed the diversity experience. Given that students often complain when they must work in groups, it is interesting to note that most seemed to enjoy this activity's group work. Students also enjoyed learning about one another's personal experiences and beliefs through the reflection activities afterwards. While many students were familiar with one another, the workshop discussions were not ones these students usually engaged in during didactic or clinical experiences. Perhaps these are areas where nursing faculty leading clinical experiences might choose to have discussions during pre- or post-conferences. N future activities, faculty should better clarify activity expectations as far as length and content so students are prepared with what will be expected of them. Given the response of many students regarding the lack of discussion of culture and clinical practice applications, it could be useful to consider some experience revisions so these topics are clearly addressed. Finally, although only a few students said they were concerned about personal bias, it is an important reminder to nursing faculty to be cautious in the ways they present student information.



Overall this proved to be a beneficial way to introduce beginning nursing students to the topic of diversity. Identifying that differences exist in student values and beliefs can help them be more sensitive in their work together and with patients. Informing students of the length of the experience and what to expect beforehand could be good adjustments to future experiences. Also, including some content especially relevant to nurses and culture might be useful.



Figure 2 Oppressed