

Investigation of Nursing Students' Intercultural Care Experiences in Clinical Practice

Selda RIZALAR^{1,a}, Aslı ÇETİN^{2,b}, Elif Beyza AKTAY^{3,c}

¹Associate Professor, Department of Surgical Nursing, Hamidiye Nursing Faculty, University of Health Science, Istanbul, TURKEY

²Turkuaz Academy Occupational Safety and Health, Bursa, TURKEY

³Taksim Education and Research Hospital, İstanbul, TURKEY

ORCID: ^a0000-0002-1592-9926; ^b0009-0009-7700-7124; ^c0009-0007-3719-6704

ABSTRACT

Aim: Today, many health institutions in our country provide treatment and care services to foreign individuals. During clinical practice, nursing students engage in the care of foreign patients and gain experience in providing intercultural care. We conducted this study to investigate the intercultural care experiences of nursing students during clinical practice. **Method:** We conducted the study with 292 students in the nursing department of a foundation university in Istanbul. A questionnaire with questions about the students' racial, ethnic, and cultural backgrounds, as well as their experiences caring for patients from different cultures, was used to collect data. The SPSS 22.0 program was used to analyze the data using frequency, percentage, mean, and standard deviation. **Results:** The mean age of the nursing students included in the study was 20.8 years; 88.4% were female students, and 98.3% were single. It was found that 31.5% of the students did not know any foreign language, 61% of them knew English, and they most frequently encountered Syrian, Libyan, and Lebanese patients in hospitals. It was determined that 16.8% of the students received training on intercultural care, 33.9% of them provided care to foreign national patients many times, 62% of them experienced difficulties while providing assistance, and 35.3% of them had access to an interpreter most of the time. The study revealed that communication accounted for 97.9% of the negative situations encountered during care, safety for 60.6%, and violence for 26.4%. It was found that 88.7% of the students experienced negative situations while collecting data: 87.7% culturally, 86.6% in patient education, 84.6% not getting feedback from the patient, and 61.3% being afraid of making mistakes. **Conclusion and recommendations:** It is recommended that intercultural care should be included in the nursing curriculum, foreign language education for students should be improved, pre-planning should be done in practice areas, and hospitals should have interpreters and language-speaking staff.

Key words: Culture, Intercultural care, Nursing, Student.

Hemşirelik Öğrencilerinin Klinik Uygulamada Kültürlerarası Bakım Deneyimlerinin İncelenmesi

öz

Amaç: Günümüzde ülkemizde birçok sağlık kurumunda yabancı uyruklu bireylere tedavi ve bakım hizmeti sunulmaktadır. Hemşirelik öğrencileri klinik uygulamalar sırasında yabancı uyruklu hastaların bakımına katılmakta ve kültürlerarası bakım vermeyi deneyimlemektedirler. Bu araştırma hemşirelik öğrencilerinin klinik uygulamada kültürlerarası bakım deneyimlerini incelemek amacıyla yapılmıştır. **Yöntem:** Araştırma İstanbul ilinde bir vakıf üniversitesinin hemşirelik bölümünde okuyan 292 öğrenci ile yapıldı. Veriler öğrencilerin sosyodemografik özellikleri ile farklı kültürden hastalara bakım verme deneyimlerini inceleyen sorulardan oluşan anket formu ile toplandı, SPSS 22.0 programında frekans ve yüzdelik, ortalama ve standart sapma ile değerlendirildi. **Bulgular:** Çalışmaya alınan hemşirelik öğrencilerinin yaş ortalaması 20,8 olup % 88,4'ü kız öğrenci, %98,3'ü bekarıdır. Öğrencilerin %31,5'inin yabancı dil bilmediği, %61'inin İngilizce dilini bildiği, hastanelerde en sıklıkla Suriye, Libya ve Lübnan uyruklu hastalar ile karşılaştıkları bulundu. Öğrencilerin %16,8'inin kültürlerarası bakıma yönelik eğitim aldığı, %33,9'unun çok kez yabancı uyruklu hastalara bakım verdiği, %62'sinin bakım verirken zorluk yaşadığı, % 35,3'ünün çoğu zaman bir tercümana ulaşabildiği belirlenmiştir. Bakım sırasında yaşanan olumsuz durumların %97,9'u iletişim, %60,6'sı güvenlik ve %26,4'ü şiddet konusunda olduğu belirlenmiştir. Öğrencilerin %88,7'si veri toplarken, %87,7'si kültürel olarak, %86,6'sı hasta eğitiminde %84,6'sı hastadan geri bildirim alamamak, %61,3'ü hata yapmaktan korkmak şeklinde olumsuz durumlar yaşadıkları saptandı.

Sonuç ve öneriler: Hemşirelik müfredatında kültürlerarası bakıma yer verilmesi, öğrencilerin yabancı dil eğitiminin geliştirilmesi, uygulama alanlarında önceden planlama yapılması, hastanelerde tercüman ve dil bilen çalışanlar olması önerilebilir.

Anahtar kelimeler: Hemşirelik, Kültür, Kültürlerarası Bakım, Öğrenci.

INTRODUCTION

The concept of culture is defined as learned and shared values, beliefs, attitudes, behaviors, customs, and traditions. Culture preserves its existence through the learning and teaching of attitudes, actions, and examples (Şahin et al., 2009; Duffy, 2001; Degazon, 1996). Culture affects many aspects of human life, such as parenting attitudes that shape personality, child-rearing style, way of thinking, spoken language, clothing style, diet, beliefs, the way patients are treated, and the practices performed on the dead (Degazon, 1996). In addition to these, it is effective at many levels in the field of health, from the formation of new diagnostic groups to the course of diseases, from symptom patterns to determining what is and is not a disease (Degazon, 1996; Nakojima & Mayor, 1996). Health-related beliefs and practices are part of the culture of the society in which we live. Understanding how the group receiving care perceives health and illness and how they react to it enables us to provide better health care. In order for health care professionals to improve the health-related behaviors of the society, it is important for them to recognize the cultural factors behind such behaviors (Henkle & Kennerly, 1990; Akşit, 1995). In this context, all members of the health team should be trained to gain the knowledge and skills necessary to provide health care that will meet the needs of culturally different individuals (Papadopoulos, 2003). Nursing care is to help and accompany an individual who cannot fulfill their special functions related to their physical and psychosocial needs (Rajan, 1995). The health problems of individuals from different cultures, their perceptions of these problems, and their expectations of help may be different (Seviğ, 2012). Consideration of the individual's culture, beliefs, customs, and values as a whole can provide quality individual care (Abdullah, 1995). In recent years, the number of migrants in the world has been increasing due to the direct or indirect effects of globalization, war, regional conflicts, poverty, and technological advances. Turkey's intense migration process presents economic, social, health, and cultural challenges. In this context, nursing students may encounter different problems while providing care to individuals from different cultures in their fields of practice. Literature reviews that look at the problems healthcare

professionals face with foreign patients in Turkey and other countries while caring for people who have moved within and between countries show that communication problems are the main issue that affects care (Tuzcu, 2014). In the study conducted by Kaya et al., which examined the views of nurses on intercultural care, 50.7% of the nurses reported that they frequently encountered individuals from different cultures in their professional lives, and 37.4% of them had difficulty communicating with these patients (Kaya et al., 2021). In the study by Yalçınır and Çam, it was determined that almost half of the nurses provided care to patients from different cultures and had difficulty communicating while providing care (Yalçınır & Çam, 2015). Aktaş et al. (2016) study, it was determined that more than half of the nurses provided care to patients from different cultures, and almost all of them had communication difficulties while providing care (Aktaş et al., 2016). Healthcare professionals must gather cultural data to comprehend how individuals, families, and societies cope with illness and to enhance and safeguard health. Unless health care initiatives are based on cultural data, it will be impossible to achieve the goal, and the care provided will be incomplete (Tortumluoğlu, 2004). This study was planned as a descriptive study to determine the situations of nursing students providing care to patients from different cultures in clinical practices, the problems they experience while providing assistance, and their solution suggestions.

MATERIAL AND METHOD

Aim of the study

We conducted this descriptive and cross-sectional study to examine nursing students' experiences of cross-cultural care in clinical practice.

Place and time of the study

The study was conducted between December 1-31, 2019, with students of the Nursing Department of the Faculty of Health Sciences at a foundation university in Istanbul.

The population and sample in the study

The population of the study consisted of students enrolled in the Nursing Department of the Faculty of Health Sciences at

a foundation university located in Istanbul, and the sample included 2nd, 3rd, and 4th grade students who accepted participating in the study taking clinical applied courses. The sample consisted of 292 students who volunteered to participate in the study. We excluded first-year students from the sample because they did not participate in clinical practice during the first semester. The nursing program follows a classical education curriculum for instruction. Both state institutions and private hospitals affiliated with a private university conduct vocational courses incorporating clinical practice. In the curriculum of the Health Science Faculty Nursing Department, the Intercultural Nursing course is given as an elective course in the 2nd year, 3rd semester.

Data Collection

The researchers collected data using a questionnaire form. The researchers prepared the questionnaire form. The questionnaire included questions about the sociodemographic and occupational characteristics of the students and their views on cross-cultural caregiving to foreign patients (2, 3, 6, 18, 19). We collected data from the students who agreed to participate in the study through one-to-one interviews. We informed the students about the study before they filled out the forms. It took approximately 10 minutes for a student to fill out the questionnaire form.

Data Evaluation

It was then put on a computer and analyzed using the SPSS 22.0 statistical package program's frequency and percentage, mean and standard deviation, and minimum and maximum numerical value score statistical methods.

Ethical Aspect of the Study

Before starting the study, research permission was obtained from the Non-Interventional Research Ethics Committee of the foundation university (Decision no: 992/27.11.2019) and research institutional permission was obtained from the institutional administration. Before starting the study, the information in the Voluntary Consent Form was read to the students, verbal and written consent was obtained from the students, and the study was conducted in accordance with the rules of the Declaration of Helsinki.

RESULTS

Table 1 shows the distribution of the descriptive characteristics of nursing students. The mean age of the nursing students was 20.84 ± 1.55 (18-30). 88.4% of the participants were female and 98.32% were single. 35.6% of the students were 2nd year students, 27.4% were 3rd year students, 37% were 4th year students. 32.5% were doing internship in Internal Medicine, 11.3% in Surgery, 20.9% in Pediatrics, and 35.3% in Internship. When the foreign language knowledge status was examined, it was stated that 68.5% knew, 61% knew English, only 7.9% knew other languages, 22.6% had poor, 42.5% had intermediate and 5.12% had good language skills.

Table 1. Distribution of Descriptive Characteristics of Nursing Students (n= 292)

Variables		
Age	X+SS (min-max)	20,84+1,55 (18-30)
	n	%
Gender		
Woman	258	88.4
Man	34	11.6
Marital status		
Single	287	98.3
Marriage	5	1.7
Class		
2	104	35.6
3	80	27.4
4	108	37.0
Most recent clinical practices		
Medical Disease	95	32.5
Sugery	33	11.3
Paediatric	61	20.9
İnternship	103	35.3

Foreign language skills		
Yes	200	68.5
No	92	31.5
Language they know		
English	178	61.0
Other	23	7.9
Language know level		
Does not know	86	29.5
Weak	66	22.6
Middle	124	42.5
Good	15	5.1

Table 2 shows the distribution of nursing students' caregiving experiences. Among the students, 20.5% stated that there was no interpreter in the hospital, 27.8% stated that interpreters were rarely available, 35.3% stated that they were available most of the time, and 16.4% stated that they were always available. It was found that 83.2% did not receive training on caring for individuals from different cultures; 78.8% considered the training necessary; 9.2% did not consider it necessary; and 12% were undecided. When the frequency of giving care to foreign patients during clinical practice was analyzed; 18.8% gave care only once, 47.3% gave care several times, and 33.9% gave care most of the time. When asked about the difficulty in providing care, 62% of the students answered yes, 11.6% no, 26.4% sometimes. In addition, when the responses of the students were analyzed, the most frequent patients were Syrian (46.2%), followed by Libyan (9.2%) and Lebanese (8.2%) nationals.

Table 3 shows the negative situations experienced by nursing students during care. It was determined that 97.9% of the students participating in the study experienced communication problems, 86.6% experienced patient education problems, 88.7% experienced data collection problems, 87.7% experienced cultural problems, 84.6% experienced not receiving feedback, 60.6% experienced security problems, 61.3% experienced fear of making

mistakes, and 26.4% experienced violence.

Table 2. Distribution of Nursing Students' Intercultural Caregiving Experiences (n= 292)

Variables	n	%
Availability of interpreters at the hospital		
No	60	20.5
Available rarely available	81	27.8
Available most of the time	103	35.3
Always available	48	16.4
Receiving training on caring for individuals from different cultures		
No training	243	83.2
Receiving education (course, subject)	49	16.8
Perceiving training as necessary		
Considering education necessary	230	78.8
Do not consider education necessary	27	9.2
Undecided	35	12.0
Frequency of caring for foreign patients during clinical practice		
One time	55	18.8
Several times	138	47.3
Most of the time	99	33.9
Difficulty in providing care		
Yes	181	62.0
No	34	11.6
Sometimes	77	26.4

Table 3. Negative Situations Experienced by Nursing Students During Care (n= 292)

Negative Situations	n	%
Communication problem		
Yes	286	97,9
No	6	2,1
The problem of patient education		
Yes	253	86,6
No	39	13,4
Data collection problem		
Yes	259	88,7
No	33	11,3
Cultural issues		
Yes	256	87,7
No	36	12,3
Lack of feedback		
Yes	247	84,6
No	45	15,4
Security issue		
Yes	177	60,6
No	115	39,4
Fear of making mistakes		
Yes	179	61,3
No	113	38,7
Violence		
Yes	77	26,4
No	215	73,6

Table 4 shows the suggestions of nursing students that can facilitate care for foreign national patients. 96.6% of the students suggested that health professionals should be taught foreign words related to health, 95.5% recommended that there should be a sufficient number of available interpreters in the hospital, and 92.8% suggested the use of printed visual education materials in patient education. In addition, 92.1% of the students suggested that compulsory preparatory education should be given to health-related departments at the university, 90.8% proposed that foreign language-speaking personnel should be recruited, 89.7% suggested that language training should be given to public employees, 83.9% suggested that foreign patients should be hospitalized in the same clinic, 71.6% suggested that intercultural care training should be given to health workers, and 90.8% suggested that foreign language-speaking personnel should be recruited.

Table 4. Nursing Students' Suggestions to Facilitate Caregiving to Foreign National Patients

Suggestions	n	%
Teaching foreign words related to health to health workers	282	96,6
Sufficient number of available interpreters in the hospital	279	95,5
Use of printed visual education materials in patient education	271	92,8
Providing compulsory preparatory education for health-related departments at the university	269	92,1
Recruitment of personnel with foreign language skills	265	90,8
Providing language training to public employees	262	89,7
Hospitalization of foreign patients in the same clinic	245	83,9
Training on intercultural care for health workers	209	71,6

DISCUSSION

The concept of intercultural nursing, which emerged in the world in the 1960s, has gradually developed (Öztürk & Öztaş, 2012). In our country, studies on intercultural nursing, cultural awareness, and cultural sensitivity have been increasing in recent years. Especially the guidelines and models recommended in cultural care guide nurses in clinical practice (Temel Bayık, 2008; Hood, 2010; Douglas et al., 2011). The necessity to provide culturally adequate care has emerged for reasons such as increasing cultural diversity, home care service understanding, and inequalities in receiving health care (Ritter & Hofman, 2010). Table 1 shows the distribution of the descriptive characteristics of nursing students. The mean age of the nursing students was 20.84 ± 1.55 years. The majority of the participants were female, and almost all of them were single. Of all students, 35.6% were 2nd grade, 27.4% were 3rd grade, and 37% were 4th grade students. The students completed their most recent internships in internal medicine (32.5%), surgery (11.3%), pediatrics (20.9%), and internships (35.3%). When their knowledge of foreign languages was analyzed, it was determined that more than half of the students knew a foreign language other than their mother tongue. Birimoglu Okuyan and Nambiar-Greenwood looked at how culturally aware nursing students were in two countries. They found that 38.1% of UK students and 26.5% of Turkish students knew a language other than their mother tongue (Birimoglu Okuyan & Nambiar-Greenwood, 2020). In our study, the rate of students knowing a foreign language was higher than in other studies. In our study, it was seen that the students who knew a foreign language mostly knew English, and about half of them knew the language at an intermediate level. In the study by Baksi et al., which examined the intercultural sensitivity levels of nursing students, it was observed that almost half of the nursing students knew foreign languages at an intermediate level (Baksi et al., 2019). In the study in which cultural awareness and intercultural sensitivity levels of nursing students were examined, it was reported that 33.1% of the students knew a foreign language. (Abbas, 2023). Our finding that nursing students have an intermediate level of foreign language knowledge is consistent with the literature.

Table 2 shows the distribution of nursing students'

caregiving experiences. In hospitals, students get help from an interpreter for communication with foreign patients. In our study, 20.5% of the students stated that there was no interpreter in the hospital where they practiced, 27.8% stated that interpreters were rarely available, 35.3% stated that they were available most of the time, and 16.4% stated that they were always available. It was found that 83% of the students did not receive training on caring for individuals from different cultures, and 78.8% of them considered training necessary. In Ceylan Polat and Akcan's study (2016), it was stated that almost all of the students did not receive training on foreign patient care during their education and stated that instruction was necessary (Ceylan Polat & Akcan, 2016). In the intercultural care awareness study conducted with midwifery students, the awareness levels of third-year students were found to be higher than those of the others. It was stated that this finding was due to the fact that the intercultural midwifery course was given in the third-year curriculum (Baykal Akmeşe et al., 2023). In a study conducted by Kaya et al. with graduate nurses, it was reported that half of the nurses frequently encountered individuals from different cultures in their professional life (Kaya et al., 2021). In our study, when the frequency of students caring for foreign patients during clinical practice was examined, it was seen that 18% of the students provided care only once, 47% provided assistance several times, and 33% provided care most of the time. In a study conducted with 332 nursing students, it was found that 27.4% had experience in caring for patients from different cultures (Açıl & Gülseven Karabacak, 2024). In Abbas's study examining the levels of cultural awareness and intercultural sensitivity of nursing students, it was stated that 48.7% of the students provided nursing care to foreign patients during their internships (Abbas, 2023). In a study examining the difficulties experienced by nursing students while caring for foreign patients, it was determined that approximately half of them had the same number of foreign patients as the number of Turkish patients, and all of them had difficulties in providing care (Ceylan Polat & Akcan, 2016). In our study, it was determined that more than half of the students had difficulty in providing care. In a study conducted by Kaya et al. with graduate nurses, it was determined that nurses frequently encountered individuals from different

cultures, and approximately one third found it difficult to provide service to individuals from different cultures (Kaya et al., 2021). In a study examining the cultural awareness of midwifery students, it was reported that 41.8% had difficulty in communicating with someone from a different culture. (Baykal Akmeşe, Çilesiz & Aydın, 2023). In addition, when the responses of the students in our study were examined, it was determined that they most frequently encountered patients from Syria (46.2%), followed by Libya (9.2%) and Lebanon (8.2%). Studies in the literature found varying levels of cultural sensitivity in students. This situation is explained by factors such as the presence of an intercultural nursing course in undergraduate programs, whether it is elective or compulsory, and the quality of the course content. A study in Turkey looked at 98 nursing undergraduate programs and found that 33 of them had intercultural nursing courses. The courses offered by these undergraduate programs were very different from one another (Tanrıverdi, 2015).

Table 3 revealed that the most common negative situations encountered by nursing students were during communication, data collection, and patient education, respectively. Additionally, 84.6% of students were uncomfortable because they could not get patient feedback, 60.6% had security issues, and 26.4% had violence issues. More than half of the students expressed fear of making mistakes while providing patient care. In Ceylan Polat and Akcan's study (2016), it was determined that students had the most difficulties during communication, data collection, caregiving, patient education, treatment, and physical examination, respectively (Ceylan Polat & Akcan, 2016). In addition, 21.3% of the students stated that cultural problems were experienced because they could not understand the needs of patients due to cultural differences (Ceylan Polat & Akcan, 2016). A study looked at how culturally aware and sensitive nursing students were. It found that communication, education, care, and religious beliefs were the most difficult parts of caring for patients from different cultures. (Açıl & Gülseven Karabacak, 2024). In a study conducted by Kaya et al. with graduate nurses, it was determined that nurses frequently tried to recognize the cultural differences of patients while caring for individuals from different cultures and had communication problems with patients (Kaya et al., 2021). Similarly, Ceylan and Çetinkaya

(2022) found that the majority of students had problems in providing cultural care to immigrant patients, and the main problems were related to communication, privacy and traditional practices (Ceylan & Çetinkaya, 2022). Table 4 shows the suggestions of nursing students that can facilitate providing care to foreign national patients. The suggestions brought by the students to provide intercultural care during clinical practice were as follows: providing professional foreign language training to health professionals, having enough interpreters in the hospital, using written educational materials in patient education, providing compulsory language preparation education in nursing schools, hiring foreign language-speaking personnel in hospitals, hospitalizing foreign national patients in the same clinic, and providing intercultural care training to health professionals. The study looked at how culturally sensitive nursing students are and what it's like to care for immigrant patients. It was suggested that courses to make nurses more culturally sensitive should be added to the curriculum and activities for cultural care should be planned (Ceylan and Çetinkaya, 2022). In a study conducted by Kaya et al. with graduate nurses, it was stated that 26.3% of the nurses organized the services provided in the institution where they worked by taking cultural differences into consideration. It was found that 78% of the nurses supported the cultural practices of the patients if it would not harm their health (Kaya et al., 2021).

Limitations of the Study

The cross-sectional type of the study limits the general interpretation of the results. The limited number of studies on the subject restricted the discussion section.

CONCLUSION AND RECOMENDATIONS

Approximately one third of nursing students lack proficiency in a foreign language, while approximately two thirds are fluent in English. They frequently interact with patients of Syrian, Libyan, and Lebanese nationalities in hospitals. The majority of the students do not receive training on intercultural care. Approximately one third of them provide care to foreign national patients many times, and two thirds of them experience difficulties while providing care. The most common negative issues they experience during care are

communication, safety, and violence, respectively. Students face difficulties during data collection, patient education, treatment, and physical examination for intercultural care. In order to provide effective intercultural care to foreign patients, it is recommended to have enough interpreters in the hospital, to use body language, to educate patients with visual materials, to train healthcare professionals in language education and intercultural care, and to hospitalize foreign patients in the same clinic. It may be recommended to include cross-cultural care in the nursing curriculum, to improve the foreign language education of students, to plan in advance in practice areas, and to have interpreters and language-speaking staff in hospitals.

AUTHOR CONTRIBUTION

Idea/Concept: SR, AÇ, EBA; Supervision: SR; Data collection and/or data processing: AÇ, EBA; Analysis/Comment: SR, AÇ, EBA; Article Writing; SR, AÇ, EBA.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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ETHICAL STATEMENT

Before starting the study, research permission was obtained from the Non-Interventional Research Ethics Committee of the foundation university (Decision no: 992/27.11.2019) and research institutional permission was obtained from the institutional administration. Before starting the study, the information in the Voluntary Consent Form was read to the students, verbal and written consent was obtained from the students, and the study was conducted in accordance with the rules of the Declaration of Helsinki.

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