Tools for Intercultural Education of Nurses in Europe (IENE 3)
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INTERCULTURAL COMMUNICATION TOOL

THEORETICAL COMPONENT

Principles and Values

Intercultural communication can be referred to as how people from different cultures languages, social and economic backgrounds, beliefs and regions come together to communicate (Ivliyeva, 2013).

The principles and values that guide this tool include:
- Genuine Curiosity
- Flexibility
- Open mindedness
- Tolerance
- Valuing experience
- Courage
- Acceptance
- Respect
- Patience

Aims

The aim of this tool is to develop your understanding of culture, and the need for awareness in intercultural communication. You will be engaged in learning through reflection, knowledge acquisition and practical activities.

Learning outcomes

When you have worked through this tool, you will be able to:
- Articulate the need for the focus on intercultural communication in current nursing practice;
- Discuss the theoretical underpinnings of intercultural communication, and the meaning of intercultural communication from different viewpoints;
- Reflect on your own practice in relation to the ability to display intercultural communication;
- Reflect on when it might be desirable to communicate competently at an intercultural level;
- Identify strategies to nurture confidence in your own practice when communicating with people from different cultures.
Relevant definitions and terms/ What the research says

What do we mean by culture?
In considering intercultural communication, it is important to first define what we mean by culture. There are multiple definitions, however Leininger (1997 cited in Bach and Grant, 2009 P126) provide a useful definition as “A common collectivity of beliefs, values, shared understanding and patterns of behaviour of a designated group of people. Building on from this, Bach and Grant (2011: P127) view culture as “a learned social experience that is often handed down through generations, thus providing a continuing connectedness with others in a community… there may be differential status roles and yet individuals connected within the culture are regarded as like-minded persons, whereas someone who is not part of the culture can be treated with mistrust and suspicion. A wide consideration of culture can include individuals, groups, organisations and professionals. Being open to the variety of values and beliefs that each culture may have can also enhance cooperative relationship (Sully and Dallas, 2010). This gives us a wider understanding of culture in the context of historical and societal perspectives. While understanding the cohesive elements of a culture, it is important to also be mindful of the individuality of people that we work and communicate with. Failure to recognise uniqueness and failure to understand that all individuals from a culture will not necessarily have the same values and beliefs can result in stereotyping (Elder et al, 2009).

Why do we need an understanding of culture?
The frequency of migration raises the importance of understanding multiculturism, which refers to the coexistence of many diverse cultural groups with one heterogeneous society (Bach and Grant, 2009). Cultural diversity related to matters such as ethnic origin, race, gender, geographic location, economic status, nationality, language, politics and religion (Bach and Grant, 2009). Healthcare professionals in the UK work with people from many different cultures and backgrounds, which highlight the need for healthcare professionals to not only have an understanding of different cultures, but also be aware of how to communicate competently with people from different cultures. Indeed, staff themselves will be culturally diverse, who will have their own cultural values that may influence decisions and allocation of tasks (Bach and Grant 2009). This requires culturally sensitivity, which Thompson (2001, cited in Bach and Grant 2009) highlights as preventing alienation and invalidation of people, while also preventing key issues being missed.

Intercultural Communication
Intercultural communication is communication across cultures and social groups. It involves the understanding of different cultures, languages and customs of people from different cultures (Wikipedia). It can be referred to as how people from different cultures languages, social and economic backgrounds, beliefs and regions come together to communicate (Ivliyeva, 2013).

According to Ivliyeva (2013) the skills of communication in general are what we use in intercultural communication. In addition, intercultural communication
includes non-judgemental and active listening, clarification and summarising as well as respecting others.

The issue of culture is a complex matter, which has an impact on the delivery of care, and also how healthcare teams work together. Nurses need to be able to communicate with knowledge of culturally appropriate language; an awareness of the impact of culture on values and behaviours is needed (Bach and Grant, 2011).

Leininger (1978) identified three potential supports for communication with diverse cultural groups, these include:

- **Cultural preservation**: This refers to recognition of health practices specific to a culture, which may be helpful or harmful. This requires attention to artefacts that should be respected and considered when addressing the individual’s health.
- **Cultural Negotiation**: Negotiation between both sides i.e. healthcare professionals and the individual, their family etc. to establish differences in goals, to establish shared understanding and a way forward. This may for example include considering issues such as making eye contact with a person, which may signify avoidance for one individual, but is a display of respect for another.
- **Cultural repatterning**: this relates to intervening to change patterns of behaviour which are having a negative impact on the person’s health. This may include consideration of any legal aspects as well as the individual’s wishes.

The way in which practitioners communicate with individuals from different cultures takes skill. According to Sully and Dallas (2010), practitioners need to have awareness of the differences in communication styles of the people they work with, who may be from a diverse range of cultures. However, stereotyping needs to be avoided, practitioners should not just consider that a person from a specific culture will require specific considerations, and must look at the individuals themself.

Sully and Dallas (2010) also recommend the use of reflection and self-awareness skills by the practitioner, in order to challenge any generalisations and stereotypes they might hold.

Language, tone of voice, speed and pronunciation are all key elements of effective communication, which also should be considered when working across cultures (Sully and Dallas, 2010). The use of touch, personal space, hand gestures or eye contact can vary greatly between cultures, something which practitioners need to be aware of as well.
Sully and Dallas (2010) also identified some key areas:

- **Self-disclosure**: this may vary between different groups, and the relevance they place on it. The practitioner must emphasise the importance of sharing specific information to ensure vital information is gained.
- **Demonstrating respect**: in a number of cultures, making eye contact with a person in authority for example can be seen as disrespectful; Professionals need to have an awareness of matters such as this, to avoid conflict through misunderstanding.
- **Values and beliefs**: how we relate to others is deeply influenced by our cultural heritage, values and beliefs.

Finally, Iviyeva (2013) discussed three phases to becoming a skilled intercultural communicator:

- **(Intercultural) Knowledge**: Knowledge of cultural values, beliefs, characteristics and behaviours
- **(Intercultural) Awareness**: This comes from having intercultural knowledge, which promotes flexibility and openness, influencing attitude and behaviour
- **(Intercultural) Understanding**: This enables the individual to recognise and respond to people in ways that otherwise may result in miscommunication due to cultural differences.

**What does national legislation and international/European treaties and conventions say on the topic?**

In the UK, the Nursing and Midwifery Council (NMC) have recently published a revised Code on professional standards of practice and behaviour for nurses and midwives. The Code (2015) contains standards that must be upheld by all UK nurses and Midwives. Four key areas are identified: Prioritise People, Practice Effectively, Preserve Safety and Promote Professionalism and Trust, each of which is elaborated in further detail to guide practice. The requirement of cultural sensitivity is noted under the section ‘Practice Effectively’ - ‘7-Communicate Clearly’:

7.2: Take reasonable steps to meet people’s language and communication needs, providing, wherever possible, assistance to those who need help to communicate their own and other people’s needs.
7.3: Use a range of verbal and non-verbal communication methods, and consider cultural sensitivities, to better understand and respond to peoples personal and health needs.
7.5 Be able to communicate clearly and effectively in English.

The NHS Constitution (2013) states that in providing care:

…we respond with humanity and kindness to each person’s pain, distress, anxiety or need. We search for the things we can do, however small, to give comfort and relieve suffering.
We find time for those we serve and work alongside. We do not wait to be asked, because we care… (page 5)

What do local policies say?

At Middlesex University we value people. We aim to create a positive change by making a lasting impression on society, business and the wider world around us. Our focus is academic excellence through excellent teaching, learning and research. We embrace innovation, creative and practical thinking, investing in our students, staff and the facilities they need to make a dramatic impact on teaching and research. Our mission is to produce a growing community of staff, students and partners who make valuable contribution to economic, cultural and social wellbeing of the societies in which they live and work.

In terms of Equality and Diversity, Middlesex University is committed to becoming an equality and diversity employer. It is important that people from all groups in society are represented at all levels of employment. This is important both for the success and development of the institution and for the provision of role models. Employment policy at Middlesex will strive to:

- eliminate unfair discrimination at each stage of the recruitment process and throughout an individual’s period of employment;
- act positively, to redress discriminatory practices;
- develop patterns of work, which encourage and enable the redress of institutional employment imbalances;
- ensure that all employees and all those acting on behalf of Middlesex University are aware of, trained in, and abide by the Equality and Diversity Policy.

Practical activities

The importance of ensuring clarity of communication cannot be underestimated for the multidisciplinary team. You must be able to ensure that messages are delivered and understood as intended, while understanding the possibility that meaning might be misconstrued due to cultural reasons.

Cultural awareness

Activity 1: Chinese Whispers

One student will be given the phrase “Nurses dispense comfort, compassion, and caring without even a prescription” as said by Val Saitsbury. They will then whisper it to another student, and so on until the message has been relayed to everyone in the group. The last person to receive the message will be asked to say it aloud, to see whether the message has remained the same, or if it has
been altered. By the end of the activity, the students may realise that the original message has been changed along the way. This will highlight the potential for messages being misconstrued if not clearly communicated.

Consider the following questions after completing the activity:

- Discuss why this might happen in an intercultural team.
- Consider if you have ever experienced this within your team as a result of intercultural misunderstanding?
- What steps can be taken to reduce the probability of misunderstanding?

Cultural Knowledge and Understanding

Activity 2: Navigating intercultural communication

Watch the following video: https://www.youtube.com/watch?v=PSt_op3fQck

Then consider the following questions:

- Discuss your understanding of intercultural communication.
- What, if any, intercultural experiences (interacting with people of different cultures) have you had?
- How anxious are you when you have to talk to someone from a different cultural background from you? Why?
- How confident do you feel when you have to talk to someone from a different culture? What is it that gives you this confidence?
- What are the main points you have learned from watching this short video and use in your own practice?

Cultural sensitivity

Activity 3: Working together

Consider the following scenario and discuss the issues that arise. An English student nurse reported that she felt isolated and 'left out' whilst on placement. This was because the majority of staff and students were of African descent. She said that they often spoke in their own language, and when she approached the office where they were, she felt that she was not welcomed as they either continued talking or laughed and ignored her. As she could not understand she assumed this was about her. They would also often share their food and not include her. She felt sad and hurt by this, and wanted to be a part of the team, but did not know how.

Discuss in your group the following questions:

- What are the main factors causing the student to feel isolated?
- If you were this student, how might you address this problem with the team?
- What actions can the team make to ensure they include all members of the team regardless of culture?
Cultural Competence

Activity 4: Tools for practice.

Thinking about what you have learnt today, in small groups come up with 10 Top Tips for communicating competently at intercultural levels.

Following the group’s final decision on 10 Top Tips, spend some time reflecting on the process:

• Did you agree with the final 10 top tips?
• Was there any disagreement within the group about what should be in the final list?
• Why was this?
• How did the group overcome this?

Assessment Component

Formative assessment:
Group reflection based on experience from practice, using the content of what has been learned today to guide reflection, identify learning that has occurred, and also future needs.

Summative assessment:
Learning from this tool will be assessed as part of the module within which the tool is embedded.

Evaluation Component

1. Self-administered evaluation questionnaire: the learner should evaluate how the tool has assisted learning through an evaluation questionnaire.

2. Peer evaluation: Peer learning groups should discuss their use of the tool, how it has assisted learning and what has been learning. This stage of evaluation should focus on knowledge gained regarding intercultural communication and how they may apply this learning in the work environment.

3. Teacher evaluation: teachers should evaluate the tool through observing classroom activities that demonstrate students developing skills in intercultural communication.
REFERENCES


USEFUL RESOURCES


communication. In L.A. Samovar & R.E. Porter (Eds.), *Intercultural

Singer, M. (1968) The concept of culture. *International encyclopaedia of the
social sciences, V3 Colo to Cult* (pp. 527-543). MacMillan Company and Free
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INTERNET RESOURCES

HTTPS://WWW.YOUTUBE.COM/WATCH?v=PSt_0p3fQck
HTTPS://WWW.YOUTUBE.COM/WATCH?v=LQQtoyStMe4

**WHEN YOU LISTEN TO THE FOLLOWING VIDEO REPLACE THE WORDS “BUSINESS” WITH THE WORD “HEALTHCARE”**
HTTPS://WWW.YOUTUBE.COM/WATCH?v=NvuU34kZDrG

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