

ETNA BULLETIN No.6, AUGUST 2015

Welcome to ETNA's Bulletin!

1. 4th European Transcultural Nursing Association International Conference Reclaiming Compassion as the Heart of Nursing, Budapest, 29-30 June 2015.

The conference was a great success and big thanks to Katalin Papp for this!

The five keynote speakers gave their diverse and unique mark the first day of the conference. Prof. Zoltan Zsolt Nagy presented the Semmelweiss University in regards to Health Science and its achievements; Professor Irena Papadopoulos highlighted in her own inspirational tone culturally competent compassionate nursing; Prof. Norma Cuellar, presented in a unique way culturally congruent health care through publishing, Dr Peter Balazs gave an interesting presentation on reproductive health of Roma communities and Dr Zoltan Balogh presented nurse's knowledge on transcultural care in Hungary.

The conference provided a great opportunity for nurses and other health professionals to network, share and discuss issues related to transcultural health and nursing. The conference included high standard research, posters, case studies and country specific studies that provided an insight of how cultural competence and compassionate care is understood and provided in different parts of the world.

ETNA committee would like to thank the organizers that worked hard and with enthusiasm. ETNA committee also thanks all participants from all over the world!



2. Note form Prof. Norma Graciella Cuellar, Editor in Chief, Journal of Transcultural Nursing

In June, I was happy to attend the European Transcultural Nursing Association bi-annual international conference in Budapest Hungary. I feel like I met lifelong friends as I continue my new tenure as Editor of Journal of Transcultural Nursing. As many of you know, the journal is well known for its publications related to culturally competent health care. A vast amount of knowledge has been published with a focus on qualitative research with an anthropological background. We are now at a point in our health care to examine how the research we have done has impacted transcultural health care or health disparity issues in our countries.

With that said, how can we improve health outcomes through the evidence based research that we have collected over the last 30 years? Through dissemination of research, are we applying what we know based on the evidence of research we have collected? I would like to see us work collaboratively with international partnerships—to understand the context of cultures provided by local residents. We need partnerships from a global perspective that challenge stereotypes and to allow new perspectives. We need collaborations with authors from a variety of international countries working to bridge relationships.

While knowledge development is always a priority, we also need manuscripts that translate this knowledge into practice. We need articles

that make a difference in health care outcomes including manuscripts on Health Outcomes, Health Policy, Social Justice, and Quality Improvement. We need concise manuscripts that present evidence through reviews of the literature, systematic reviews, or meta-analysis Developing a strong evidence based practice is accomplished through a systematic reporting of research studies. This can be done through the utilization of manuscript guidelines that have been developed to allow for comparison of the evidence. Publication guidelines are available based on the methodology you use for your research (see total list at http://www.equator-network.org/).

- 1. CONSORT: Consolidated Standards of Reporting Trials
- 2. <u>STROBE</u>: STrengthening the Reporting of OBservational studies in Epidemiology
- 3. <u>PRISMA</u>: Preferred Reporting Items for Systematic Reviews and Meta-Analyses
- 4. MOOSE: Meta-analysis of Observational Studies in Epidemiology
- 5. QUOROM: QUality Of Reporting Of Meta-Analyses
- 6. <u>SQUIRE</u>: Standards for Quality Improvement Reporting Excellence

To support you as a reader, author or reviewer, Sage offers a variety of web pages that may help you including:

- -Manuscript Central: https://mc.manuscriptcentral.com/tcn
- -Translator/Editor: http://languageservices.sagepub.com/en/
- -Online First http://tcn.sagepub.com/content/early/recent
- $Podcast: http://\underline{tcn.sagepub.com/site/misc/index/podcasts.xhtml} \\$
- -Journal Author Gateway:

http://www.sagepub.com/journalgateway/authorGateway.htm

-ReviewerGateway:

http://www.sagepub.com/journalgateway/reviewerGateway.htm

-E-mail alerts: http://tcn.sagepub.com/cgi/alerts

-RSS feed: http://tcn.sagepub.com/rss/

I look forward to seeing my new friends again, very soon Norma Graciela Cuellar PhD, RN, FAAN

3. Cultural Aspects of Compassion In Nursing" - A research manuscript
The concluded international collaborative research headed by Prof. Irena
Papadopoulos titled: Exploring the cultural aspects of compassion in
nursing: An international on-line survey was further pursued in the
Philippines. After informing the primary author, using similar set of

questionnaire (quantitative/qualitative), the title applied was "Exploring the Cultural Aspects of Compassion in Nursing: A Survey Study". After

Exploring the Cultural Aspects of Compassion in Nursing: A Survey Study

Dr. Irena Papadopoulos, Middlesex University, The Burroughs, London NW4 4BT, UK. mailserv@mdx.ac.uk

Dr. Sylvia B. Pangilinan et. al pangilinansylvia@yahoo.com

presentation, the manuscript was awarded first place in an in-house peer review held at the Bataan Peninsula State University Balanga Campus, Philippines with Ms. Ria Ann L. Dizon, University Research Director.





(In fotos: Aileen, Fatima, Mowey, Precious, Jessica-Bataan St. Joseph Hospital ICU staff nurses, & affiliate nursing students of Bataan Peninsula State University College of Nursing). From the gathered 310

respondents, one of the most important result was "person's personal experience of compassion was viewed as the most important influence for developing compassion".

Generally in the Philippine culture, compassion is first experienced at home, learned from parents and elders brought about by close family ties. (In foto: L-R, Ria-Ann, RDO director; researchers- Sylvia, Ma. Florinda, Rosita, Florenda, Ma. Elena, Evelyn, Orpha, and Norma)



Thanks Sylvia Biglete-Pangilinan, Philippines, for writing and sharing this.

4. Leadership and Cultural Competence of Healthcare Professionals: A Social Network Analysis.

Background: International migration is a global phenomenon challenging healthcare professionals to provide culturally competent care.

Objectives: The purpose of this study was to investigate the influence of leaders on the cultural competence of healthcare professionals.

Methods: A cross-sectional survey was conducted from 2010 to 2012 to obtain data for a social network analysis in 19 inpatient services and five primary care services in Belgium.

The Competences in Ethnicity and Health questionnaire was used. A total of 507 healthcare professionals, including 302 nurses, identified their social relationships with other healthcare professionals working in their service. Highest in-degree centrality was used to identify the leaders within each health service. Multiple regressions with the Huber sandwich estimator were used to link cultural competence of leaders with the cultural competence of the rest of the healthcare staff.

Results: Cultural competence of the healthcare staff was associated with the cultural competence of the leaders. This association remained significant for two specific domains of cultural competence—mediation and paradigm—after controlling for contextual and socio-demographic variables. Interaction analysis suggested that the leadership effect varied with the degree of cultural competence of the leaders

Discussion: Cultural competence among healthcare professionals is acquired partly through leadership. Social relationships and leadership effects within health services should be considered when developing and implementing culturally competent strategies. This requires a cautious approach as the most central individuals are not always the same persons as the formal leaders.

Key Words: Belgium, health equity, immigration, leadership, social network, transcultural nursing

Free full text: www.ncbi.nlm.nih.gov/pubmed/25871625

Thanks a lot Marie Dauvrin & Vincent Lorant, Institute of Health and Society, Université catholique de Louvain, Belgium for sharing this with the ETNA members.

5. MIPEX Migrant Integration Policy Index/Health strand http://www.mipex.eu/

The Migrant Integration Policy Index (MIPEX) is a unique tool which measures policies to integrate migrants in all EU Member States, Australia, Canada, Iceland, Japan, South Korea, New Zealand, Norway, Switzerland, Turkey and the USA. 167 policy indicators have been developed to create a rich, multi-dimensional picture of migrants' opportunities to participate in society.

The index is a useful tool to evaluate and compare what governments are doing to promote the integration of migrants in all the countries analysed. The project informs and engages key policy actors about how to use indicators to improve integration governance and policy effectiveness. To that end, the project identifies and measures integration outcomes, integration policies, and other contextual factors that can impact policy effectiveness; describes the real and potential beneficiaries of policies; and collects and analyses high-quality evaluations of integration policy effects.

Thanks to the relevance and rigor of its indicators, the MIPEX has been recognised as a common quick reference guide across Europe. Policymakers, NGOs, researchers, and European and international institutions are using its data not only to understand and compare national integration policies, but also to improve standards for equal treatment. Building on its ongoing success, the MIPEX project is entering its fourth edition with a new policy strand and additional indicators.

The MIPEX aims to address this by providing a comprehensive tool which can be used to assess, compare and improve integration policy. The MIPEX includes 38 countries in order to provide a view of integration policies across a broad range of differing environments. The tool allows you to dig deep into the multiple factors that influence the integration of migrants into society and allows you to use the full MIPEX results to analyse and assess past and future changes in policy.

Text retrieved from: http://www.mipex.eu/what-is-mipex

Thanks Marie Dauvrin, Belgium for sending this.

6. Italian research on the work and integration of nurse migrants I want to let you to see the Italian research on the work and integration of nurses migrants where I collaborated, it is present in a monograph.

This monograph, realized from IRPPS-CNR together with the College IPASVI Roma, addresses the working conditions of foreign nurses in Rome and province, with special attention to those of Peruvian nationality and Indian. The study, based on life experiences, in particular, analyze the perceptions of workers with respect to integration in the workplace, to the relations with their Italian colleagues and the growing instability of employment related to the current financial difficulties of the Italian

health system. The analysis shows that, while it does not occur elements of contrast between Italian and foreign colleagues, the other will detect the first signs of a review of the project migration of nurses Indians and Peruvians as a result of the crisis that is sweeping the industry health

Tracks from: Accorinti, M & Gagliardi F. Social integration and employment of foreign nurses Rome: the case of the Indian &Peruvians workers 2014

Is available at the following links and the possibility for the first link on google of the english translation.

http://www.irpps.cnr.it/e-pub/ojs/index.php/mono/article/view/978-88-98822-04-1/pdf

http://webcache.googleusercontent.com/search?g=cache:jghd4zn6gZQJ: www.irpps.cnr.it/e-pub/ojs/index.php/mono/article/download/978-88-98822-04-1/154+&cd=5&hl=it&ct=clnk&gl=it

Thanks Maria Ymelda Tolentino Diaz, Italy for preparing this.

7. An opportunity to introduce the Papadopoulos Model in the field of education

An invitation was given to me as guest speaker Of the annual conference at the Far Eastern University Institute of Nursing Manila, Philippines (my Alma Mater) last January 21, 2015

The theme was "Culturally Competent Nursing Care: Braving the Challenges of Globalization" 7th DEAN FELICIDAD ELEGADO MEMORIAL LECTURE

What a great opportunity to introduce topics like "MOOC Culturally Competent Braving the Challenges of Globalization Compassion" and the "Developing Culturally Competent Compassion in Health Professionals" developed by Papadopoulos (2014)

The audiences were receptive and very motivated who eagerly participated in the open forum. Knowing what and applying how to congruently and appropriately render client care are very important

aspects to consider in rendering nursing care The said event was spearheaded by Ma. Belinda G. Buenafe, Dean of the Institute of Nursing and Ms. Joycelyn A. Filoteo, Faculty in-charge.

Culturally Competent Nursing Care:

FEU - University Conference: De January 21, 2015

Present were alumni, students, faculty members, and Lydia Palaypay, former Dean of the Institute of Nursing and Vice President for Academic Affairs.

(in foto: 2nd & 3rd from left Dean Belinda and Sylvia together with some faculty of nursing)



Thanks Sylvia Biglete-Pangilinan, Philippines, for writing and sharing this

- 8. ETNA's homepage. Please visit it and help us to improve it http://www.europeantransculturalnurses.eu/
- 9. Next Bulletin will be send to you in December 2015. Please send us news you wish to publish in the bulletins and we will endeavour to include them. The aim of the bulletins is to share information and raise awareness on matters related to Transcultural Health. We welcome your feedback on our Bulletins!

