



**TURUN AMMATTIKORKEAKOULU
TURKU UNIVERSITY OF APPLIED SCIENCES**

Bachelor Thesis

**Foreigners Studying Nursing in Finland: A Study
about Experiences from Practical Placements**

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**Degree Programme in
Nursing
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TURKU UNIVERSITY OF APPLIED SCIENCES

EVALUATION OF THE BACHELOR'S THESIS

Author: GIAGOMO MARIANI

Specialization line: Degree Programme in Nursing

Evaluation	E5	G4	G3	S2	S1	Grounds:
Content	X					Thesis is dealing with an actual and important issue which is not largely researched- The content of theses is logically structured with relevant performance.
Method		x				The literature search should deserve more attention, although even in this stage it is rather covering. The number of subjects should have been bigger, other wise the method is well argued
Process	X					The author has shown flexibility and capability for systematic work. Authors' participation to supervision was relevant. Author has show capability to independent work.
Report		x				Thesis is well written by using good language and the given guidelines have been followed. The report is still in need of editing e.g. references and structuring the body of text, although major improvement during the research process is obvious.
Practical significance	x					The thesis is pioneering work on area with very limited research. The research is a piloting work and gives relevant, thus limited, information for coming research endeavors.

Summary: Interesting topic and the results, thus limited, do add information for those working and planning nursing education for foreign students in Finland. In spite of some limitations, this study shows author's capability and competence for structured written performance.

Grade 5

Date: 15.10. 2009

Heikki Ellilä

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ABSTRACT

Degree Programme in Nursing	
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<p>Eight Finnish universities of applied sciences offer English taught degree programmes in nursing. The number of foreign students who apply to these degrees is increasing. Increasing as well is the population of foreigners living in Finland. Previous researches have shown that practical placement in foreign settings can be problematic due to cultural and language barriers. Foreign nursing students can be an important resource to answer the growing needs of multicultural care in the healthcare sector. The purpose of this research was to understand what problems foreign nursing students, enrolled in Finnish universities of applied sciences, encounter in their practical placements in Finland. METHOD: The sample was composed of 75 students, of which 49 were foreigners and 26 Finnish. All of them were enrolled in bachelor degree programmes in nursing, in six different universities of applied sciences. By using a questionnaire, which contained fifteen close-answer questions and two open-answer questions, information about practical placements was collected. Students were asked to give evaluations about different aspects of their practical placements. RESULTS: foreign students gave lower mean evaluations on the majority of the topics. From the open-answer questions emerged examples of situations when cultural diversity was appreciated and situations when cultural diversity was felt to be an obstacle. The main problems were due to language barriers and misunderstandings due to cultural differences. Some good examples emerged of situations where, thanks to openness of all actors involved in the dialogue, cultural diversity enhanced confrontation and became a factor that improved patient care.</p>	
Keywords: culture, cultural sensitivity, practical placement, tutor, foreigner, nursing, multicultural, Finland, student.	
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1. INTRODUCTION

At present Finnish Universities of Applied Sciences offer seven English taught degree programmes in nursing and one English taught degree programme in public health nursing. According to the Finnish Centre for Statistics, the number of foreign students enrolled in Finnish Universities of Applied Sciences in lower bachelor degree programmes was in 2003 of 3482: 2,7% of total student population in the mentioned universities. In 2007 the amount reached 5336: 4,1% of the total student population in University of Applied Sciences enrolled in lower bachelor degree programmes. In 2007 of these 5336 foreign students, 725 were enrolled in bachelor degree programmes from social and healthcare sector.

The research presented in this essay is about foreign students enrolled in bachelor degree programmes in nursing at six Finnish Universities of Applied Sciences. It focuses on their experiences during practical placements in Finland. Results are compared with the ones from Finnish students from same bachelor degree programmes.

According to De and Richardson (2008) cultural factors are becoming more important within the healthcare sector, both for the change within the patient population and staff population as well. Soroff et al. (2002) sustain that cultural diversity within the staff population can be a way of responding to the new needs of cultural diversity in the healthcare field. Foreign nursing students may represent for the future an important source of cultural diversity, enabling healthcare services to offer more culturally competent care.

Previous researches done by Latva-Pukkila (2007), Koskinen and Tossavainen (2003 & 2002) and Nahas (1998) about experiences of nursing students undergoing their practical period in foreign cultures have shown that they often encounter problems due

to language and cultural differences. The aim of the research presented in this essay was to discover what problems foreign nursing students enrolled in Finland face during practical placements. The author hopes that the results will be useful to further develop teaching of cultural sensitivity in nursing degree programmes and to help understand multicultural interaction, both within the students and nurses and within students and patients.

2. REVIEW OF LITERATURE

2.1 Culture

“Culture, or civilization, taken in its broad, ethnographic sense, is that complex whole which includes knowledge, belief, art, morals, law, custom, and any other capabilities and habits acquired by man as a member of society.” (Tylor 1871, 1)

***a:** The integrated pattern of human knowledge, belief, and behavior that depends upon the capacity for learning and transmitting knowledge to succeeding generations.*

***b:** The customary beliefs, social forms, and material traits of a racial, religious, or social group ; also : the characteristic features of everyday existence (as diversions or a way of life} shared by people in a place or time <popular culture> <southern culture>*

***c:** The set of shared attitudes, values, goals, and practices that characterizes an institution or organization <a corporate culture focused on the bottom line>*

***d:** The set of values, conventions, or social practices associated with a particular field, activity, or societal characteristic.*

(Merriam Webster online dictionary, 2009)

The above description of culture given by Taylor in 1871 is the first official, anthropological, comprehensive definition. Nowadays it is still considered valid, because describes culture in its wider meaning and in a simple way. The other definitions reported above, deepen the first one by focusing on the different aspects of culture.

From the year 1871 up to nowadays many definitions of the word “culture” have been given. There is no agreement on an official one, and in the author’s opinion they compensate each other. Culture is something strictly connected with human nature; it reflexes its complexity, it evolves continuously, making difficult the formulation of one single exhaustive definition.

De and Richardson (2008) recognise that in the healthcare field, cultural factors are now broadly acknowledged to be a vital aspect of therapeutic relationship. Therefore, health professionals who make unsubstantiated assumptions and have stereotypical attitudes about those who differ from themselves not only place the health and well being of their patients at risk, they also seriously impair service delivery. According to Gray and Thomas (2006), when the word culture is used in nursing literature, it has been typically illustrated with concepts that are consistent with essentialist view: race, ethnicity, national origin or religion. Each of these concepts is treated as an objective distinguishable feature of an individual group, a feature that exists and is stable over time. This model has also contributed to narrowing the view of what counts as culture. The usual list of cultural groups based on race, ethnicity and religion obscures other types of groups that may share common attitudes, values, beliefs and life practices. This essential perspective makes invisible the processes whereby culture is created and recreated continuously.

2.2 Cultural sensitivity

Koskinen and Tossavainen (2003) define intercultural competence in nursing students as the student’s gradual process of personal maturation from ethnocentrism towards ethnorelativism, which might lead to enhanced client care in nursing practice. They sustain that it is generally agreed that intercultural competence is a developmental process of personal maturation, whereby the learner evolves from lower to higher levels of intercultural awareness. Koskinen and Tossavainen (2002, 2003) recognize the following as key points in the development of cultural sensitivity in nursing students: the intercultural clinical tutor dialogue that should stimulate reflection; the impact of stressful adjustment to differences.

According to Koskinen and Tossavainen (2003) in order to develop cultural sensitivity, students (and staff) nurses should first internalise the concept of culture as basic to their own behaviours and attitudes. They might recognize how their own background distorts their abilities to acknowledge intercultural differences and to develop a sensitive awareness toward other cultures and healthcare systems.

2.3 Definition of tutor

The English Nursing and Midwifery Council uses the word “mentor” to define the professional who has met the NMC defined outcomes for a mentor, who facilitates learning, supervises and assess students in a practice setting (NMC 2005).

In this study the author uses the word “tutor” to define a similar concept. Tutor is the registered nurse who facilitates learning, supervises and assesses students in the practice setting.

Saarikoski et al. (2003) in their research show that the tutor-student relationship is correlated clearly with the total satisfaction of students during their periods in practice settings and with the development of intercultural sensitivity. In the guidance of foreign students during clinical practice, is very important both for the growth of the student as nurse and for the patients, that the tutor and other nurse colleagues are able to show a “cultural sensitivity”. Koskinen and Tossavainen (2003) recognise that culturally sensitive tutors and nurses are able to solve problems that might rise due to diverse cultural background and language barriers.

In culturally responsive supervision, all supervisees felt supported for exploring cultural issues, which positively affected the supervisee, the supervision relationship, and client outcomes. In culturally unresponsive supervision, cultural issues were ignored, actively discounted, or dismissed by supervisors, which negatively affected the supervisee, the relationship, and/or client outcomes
(Burkard et al. 2006, abstract)

2.4 Multicultural societies – multicultural health care services

Rapid growth in worldwide migration, changes in demographic patterns, varying fertility rates, increased numbers of multiracial and multiethnic individuals, and advanced technology contribute to cultural evolution.

(Jeffreys 2006, p 22)

All European and western countries in general have seen in the last years a great increase in the numbers of foreigners within their societies. This situation reflects also in the healthcare field, where not only the patients' population diverse, but the staff population is as well (Geri- Ann Galanti, 1997). Together with the increasing number of people from outside cultures within societies, and the need to offer culturally sensitive health care services, those same countries are also facing a shortage within the health care personnel. Foreign students and workforce are increasingly filling this gap.

Changing demographic of students and health care professionals, as well as the severe shortage of nurses and nursing faculty, further complicate effective transformation.

(Jeffreys 2006, p 22)

Healthcare services encounter on a growing rate the need to answer to the needs of different ethnic groups and cultural minorities, and the nurses must be able to give culturally sensitive care. Soroff et al. (2002) believe that enrolling, retaining, and graduating minorities from nursing programs helps to foster proportionate ethnic representation in the nursing profession. European Union is promoting free mobility, educational quality and life long learning. For Launikari and Puukari (2005) this means that teachers from all over Europe are increasingly encountering students with various ethnic backgrounds of all ages. Saarikoski et al. (2002) believe that the ongoing and active student exchange is an illustration of potential changes to the future nature of nursing in Europe.

2.5 The situation in Finland

The beginning of the new millennium saw a new emphasis in internationalisation of Finnish higher education. In addition to student exchanges, more and more attention is paid to recruiting international degree students. Garam (2001) reminds us that for the first time, in 2001 the Ministry of Education's strategy for the internationalisation of higher education has set quantitative targets for international degree students. The target was set at 10 000 – 15 000 international students, that is, 4% of all higher education students in Finland.

An International Nursing Education Programme began as an experiment in Espoo in 1993. The main idea was also to make sharing knowledge and developing nursing care internationally possible; that is why the language of instruction was changed into English, which in turn opened the doors to foreign students and nurse educators. Nowadays altogether in the whole country are available seven nursing-degree programmes and one public nurse-degree programme.

According to the Finnish Center for Statistics (2008 and 2009) In the year 2006 there were 717 foreign students enrolled in different bachelor degree programmes within the sector of healthcare and social studies in Finnish polytechnics. In 2007 the number raised to 725.

In Finland is becoming more common the recruitment of work force from abroad to answer to the lack in the healthcare sector. Examples are the recruitment of Filipino, Polish, and Chinese nurses to work as practical nurses in Finland.

At present in the health care sector a large-scale recruitment of workers, from the developing countries to the industrialised countries is taking place.

(Markkanen and Tammisto 2005, p 13)

Work-related immigration is essential to keep Finland on its feet. The ability to adjust to new situations is required from Finns and immigrants alike.

(Suurpää 2008, p 22)

As other European countries, also Finland is facing a situation where the population of non-Finnish culture is increasing, which requires the healthcare services to develop in order to respond to these new needs.

2.6 Experiences of practical training in a foreign setting

Research findings by Latva-Pukkila (2007) have shown that both Finnish and foreign nursing students studying in Finland have encountered problems when dealing with multicultural customers and staff while on practical training abroad and in Finland. The problems mostly are due to language barriers, misunderstandings because of different cultures and of how people see nurses and their role in different cultures.

According to experiences of Finnish nursing students doing their part of their practical training abroad, collected by Koskinen and Tossavainen (2003), the staff was often not prepared to receive Finnish students to the units and was therefore unfamiliar with the student background and learning objectives. In these situations the language caused obstacles in direct client encounters, which were often partially avoided. Koskinen and Tossavainen (2003) come to the conclusion that exchange nursing students, who spent part of their practice period in Finland, faced intercultural differences and language barriers when they entered into their practice settings.

2.6 Clinical learning

Raij (2000) states that clinical learning should be learning that takes place in an environment where students can integrate and apply the theoretical studies they have had at their institutes. A successful outcome of clinical learning depends on many factors; according to Raij (2000) the most important is a positive tutor-student relationship, which includes tutors availability, clinical and teaching skills, giving feedback.

Saarikoski (2003) writes that supervisory relationship is the most important single element of pedagogical activity of staff nurses. In fact satisfied students have had a

successful tutor relationship and frequently enough access to private supervision sessions with tutor.

According to Saarikoski (2003). Another important element in clinical learning is the ward atmosphere. Roberts (2008), Raij (2006) and Kelly (2006) recognise that when starting a clinical placement, students feel like outsiders and for them is important to feel accepted by the staff. Ousey and Johnson (2006) write that while in clinical placement, students have to learn and understand the cultural patterns of each ward or unit; in addition they need to understand the language of that culture to be able to cross the boundaries and feel a welcome member of the team. In order to facilitate this process of adaptation, the staff nurses need to realize the existence of a “ward culture” within which they act and they have to be open to take a supervisory role if needed.

In the specific case of students and nursing staff/tutor coming from different cultural backgrounds, Latva-Pukkila (2007), Koskinen and Tossavainen (2003 and 2002) and Nahas (1998) have shown that the adaptation of students and learning process can be more problematic. Nahas (1998) suggests that in such situations the dialogue between the nursing students and the clinical teachers would be meaningful and satisfying if both tried to listen, understand, reflect and probe the language meanings and practices embedded in the culture. He also suggests to nursing tutors to be constantly aware of the cultural diversity of nursing students and make an effort to learn about their cultural beliefs, values and practices and use this knowledge to maximise students’ learning.

3. PURPOSE & AIMS

3.1 Purpose of the study

As foreigner studying nursing in Finland, the present author is directly living the situation described in this study. He has personally experienced that cultural and language differences can cause misunderstandings.

The purpose of this study was to understand what problems foreign nursing students in Finland face during practical placements.

3.2 Aims of the study

The aim was to collect relevant information and elaborate them, in order to investigate the problems of foreign nursing students in Finland during practical placements.

4. METHODOLOGY

4.1 Sample

The sample was composed of Finnish and foreign students enrolled and presently studying at second, third and last year of international bachelor degree programmes in nursing at six Finnish polytechnics. The total number of students involved was 75, of which 49 are foreigners and 26 are Finns.

4.2 Data collection

Data was collected by means of a questionnaire, containing fifteen close-answer questions (yes/no; give a valuation 1 to 5 type of questions) and two open questions. In the open-answer questions students could give examples of positive and negative experiences during their practical placements.

The decision to use a questionnaire was made because considered by the present author as the best method to collect data from many people and from those living far away. The other reason for using a questionnaire and for having mostly close questions was that the study was going to be for a good part a quantitative study, since the purpose was to produce clear and quantifiable results. The author decided to include two open questions, because subjects' own experience told by own words is important to understand positive/negative feelings.

The questioner was realised after consulting the existing literature about practical trainings of nursing students in multicultural environments.

The questioner was based on the following topics

- Communication with tutor-nurse
- Communication with other nurses
- Communication and possibility to be in contact with the patients
- Planning of activities and goals
- Tutor being active and following student's learning path
- Nurses guidance
- Ward environment
- Facility in communicating
- Meeting patient of same cultural background

4.3 Ethical considerations

The main ethical problems were the ones rising from confidentiality. All the information collected with the questionnaire was kept anonymous. This information was given together with introduction to the questionnaire.

The students themselves, nurses and patients will hopefully benefit from the results of the research. The author expresses his hope to be able to give relevant information to teachers, tutors, head-nurses and policy makers in general; who can then address the needs of the participants.

5. RESULTS

The results from the close-answer questions were analysed using the program SPSS. Mean values for each question was obtained. The outcomes from Finnish students and foreign students were compared.

The answers to the open questions were analysed by dividing them into different groups. Each group represents a different topic.

5.1 Close-answer questions

The topics of the close-answer questions were the following:

- Communication with tutor-nurse
- Communication with other nurses
- Communication and possibility to be in contact with the patients
- Planning of duties and goals; daily tasks and learning objectives
- Tutor being active and following student's learning path
- Nurses guidance
- Ward environment
- Facility in communicating thoughts and feelings; being understood.
- Feeling of being treated equally to Finnish students
- Meeting patient who speak student's same mother tongue

The students answered by giving valuations from one (1) to five (5) according to the scale: 1 = very poor; 2 = poor; 3= satisfactory; 4 = good; 5 = very good

Communication with tutor-nurse

The mean valuation given by students about communication with tutor-nurse was: for the Finnish students 4,00, for the foreign students 3,76

Nationality 2		Communication with tutor-nurse
Finnish	Mean	4,00
	N	26
	Std. Deviation	,632
Foreigner	Mean	3,76
	N	49
	Std. Deviation	,925
Total	Mean	3,84
	N	75
	Std. Deviation	,839

Tab. 1: Communication with tutor-nurse

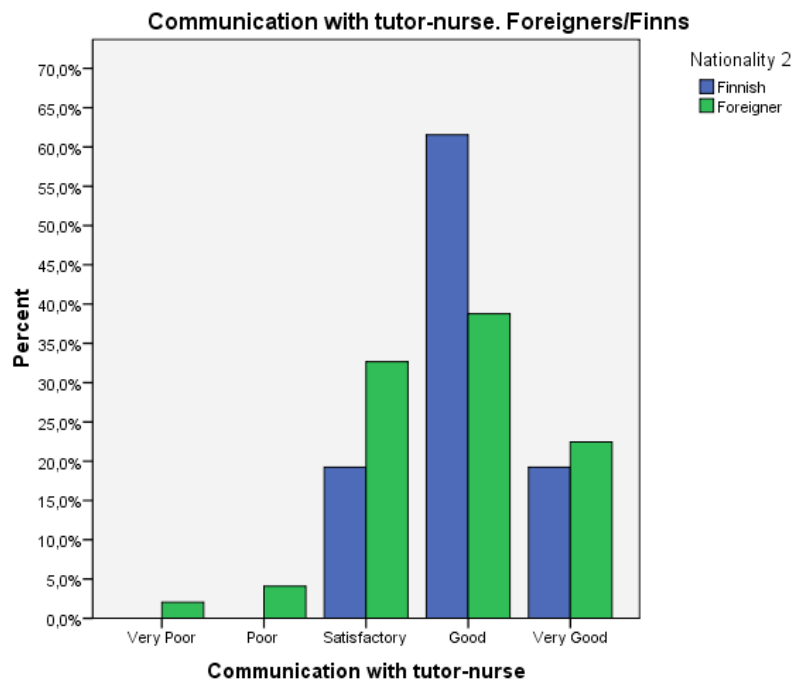


Fig. 1: Communication with tutor-nurse

Communication with other nurses

The mean valuation given by students about communication with other nurses was: for Finnish students 3,56, for the foreign students 3,04

Nationality 2		Communication with other nurses
Finnish	Mean	3,56
	N	25
	Std. Deviation	,712
Foreigner	Mean	3,04
	N	48
	Std. Deviation	1,010
Total	Mean	3,22
	N	73
	Std. Deviation	,946

Tab. 2: Communication with other nurses

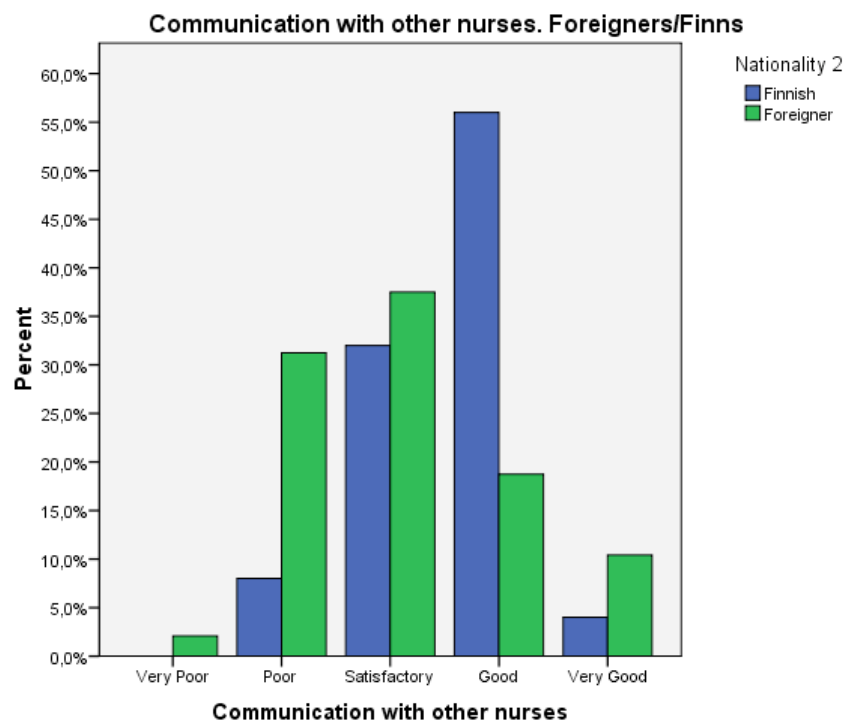


Fig. 2: Communication with other nurses

Communication with patients

The mean valuation given by students about communication with patients was: for the Finnish students 4,35, for the foreign students 3,31.

Nationality 2		Communication with patients
Finnish	Mean	4,35
	N	26
	Std. Deviation	,629
Foreigner	Mean	3,31
	N	49
	Std. Deviation	,962
Total	Mean	3,67
	N	75
	Std. Deviation	,991

Tab. 3: Communication with patients

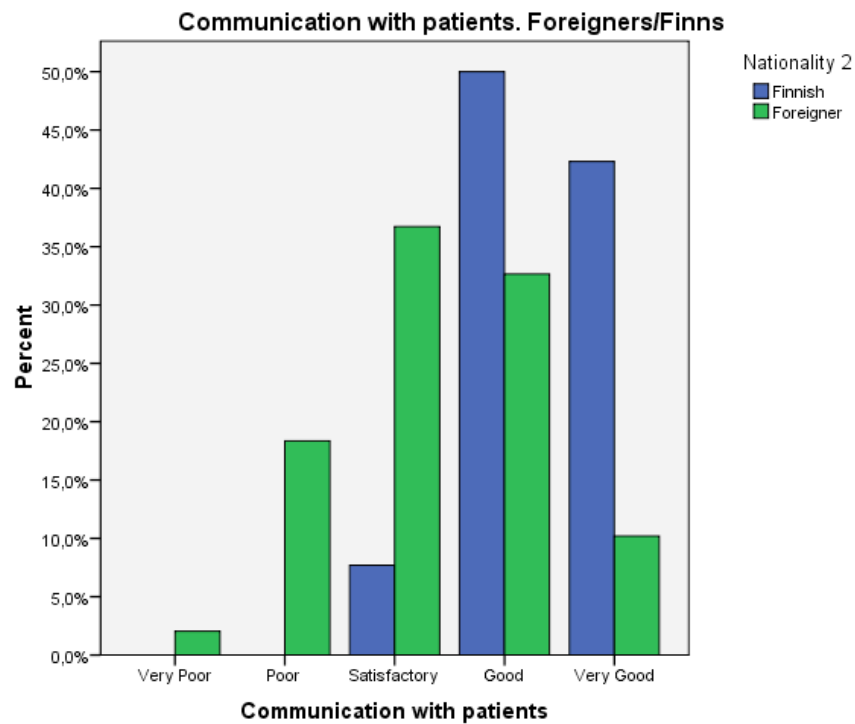


Fig. 3: Communication with patients

Possibility to be in contact with the patients

The mean valuation given by students about the possibility to be in contact with the patients was: for the Finnish students 4,50, for the foreign students 3,53.

Nationality 2		Possibility to be in contact with the patients
Finnish	Mean	4,50
	N	26
	Std. Deviation	,707
Foreigner	Mean	3,53
	N	49
	Std. Deviation	1,063
Total	Mean	3,87
	N	75
	Std. Deviation	1,057

Tab. 4: Possibility to be in contact with the patients

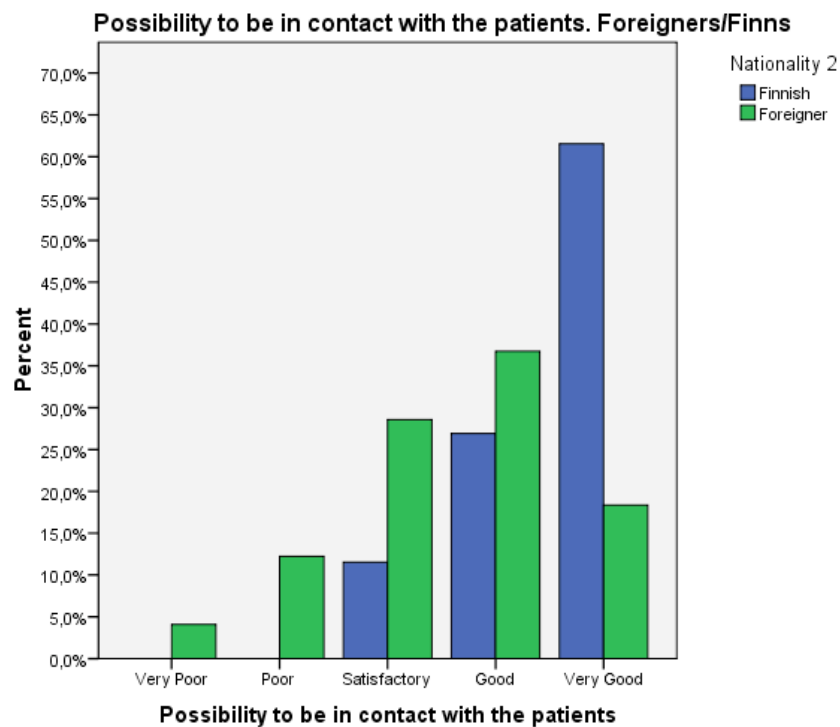


Fig. 4: Possibility to be in contact with the patients

Planning of duties and goals

The mean valuation given by students about the planning of duties and goals was: for the Finnish students 3,42, for the foreign students 3,73.

Nationality 2		Plan about your duty and goals
Finnish	Mean	3,42
	N	26
	Std. Deviation	,578
Foreigner	Mean	3,73
	N	49
	Std. Deviation	,836
Total	Mean	3,63
	N	75
	Std. Deviation	,767

Tab. 5: Planning of duties and goals

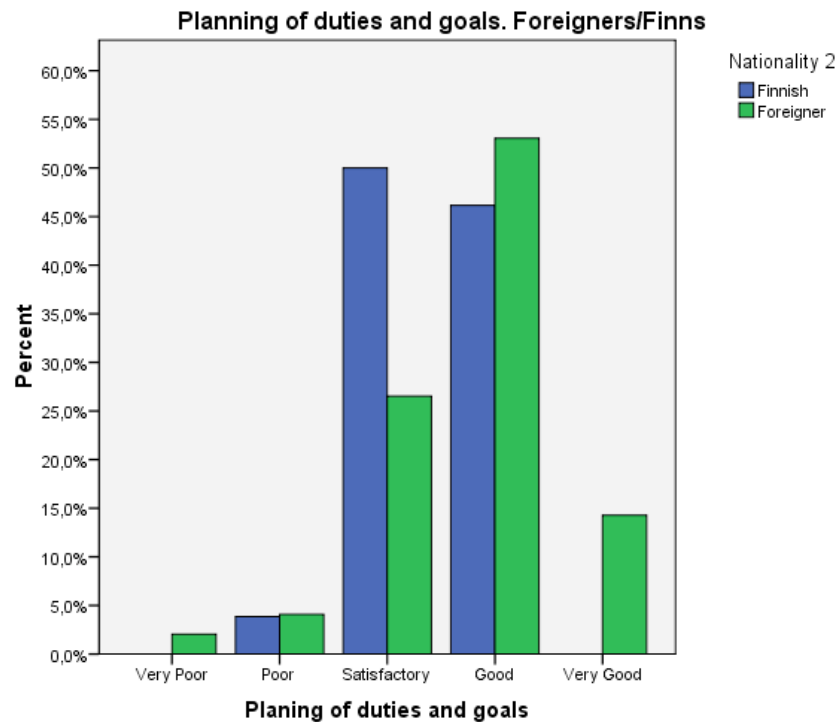


Fig. 5: Planning of duties and goals

Planning about daily tasks and learning objectives

The mean valuation students about the planning of daily tasks and learning objectives were: for the Finnish students 3,35, for the foreign students 3,63.

Nationality 2		Plan about daily tasks and learning objectives
Finnish	Mean	3,35
	N	26
	Std. Deviation	,629
Foreigner	Mean	3,63
	N	49
	Std. Deviation	,859
Total	Mean	3,53
	N	75
	Std. Deviation	,794

Tab. 6: Planning about daily tasks and learning objectives

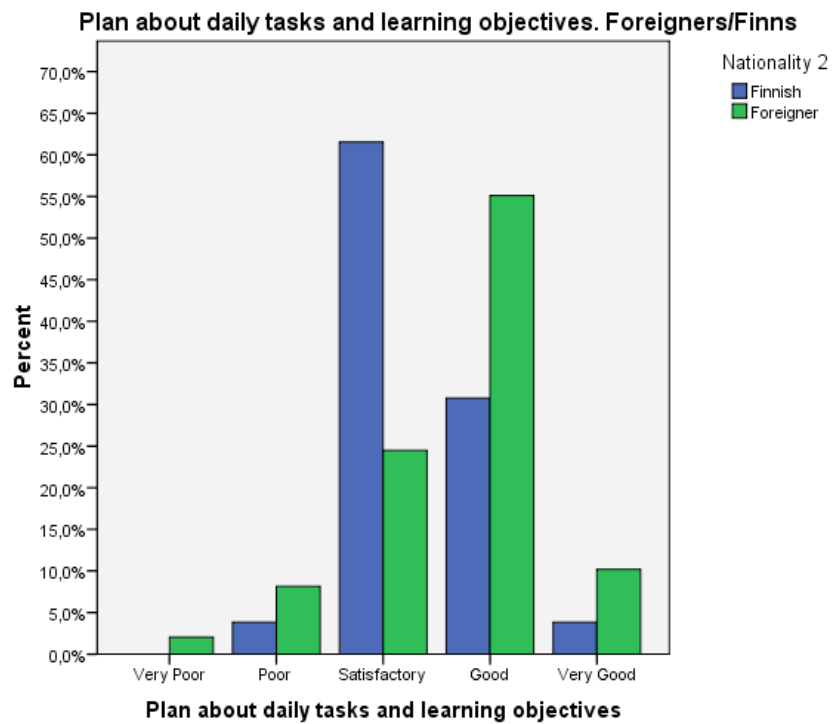


Fig. 6: Planning about daily tasks and learning objectives

Tutor-nurse being active in following student's learning path

The mean valuation given students about tutor guidance was: for Finnish students 3,15, for foreign students 3,59.

Nationality 2		The tutor-nurse made sure that you would follow learning plans and practice necessary skills
Finnish	Mean	3,15
	N	26
	Std. Deviation	,925
Foreigner	Mean	3,59
	N	49
	Std. Deviation	,788
Total	Mean	3,44
	N	75
	Std. Deviation	,858

Tab. 7: Tutor-nurse being active in following student's learning path

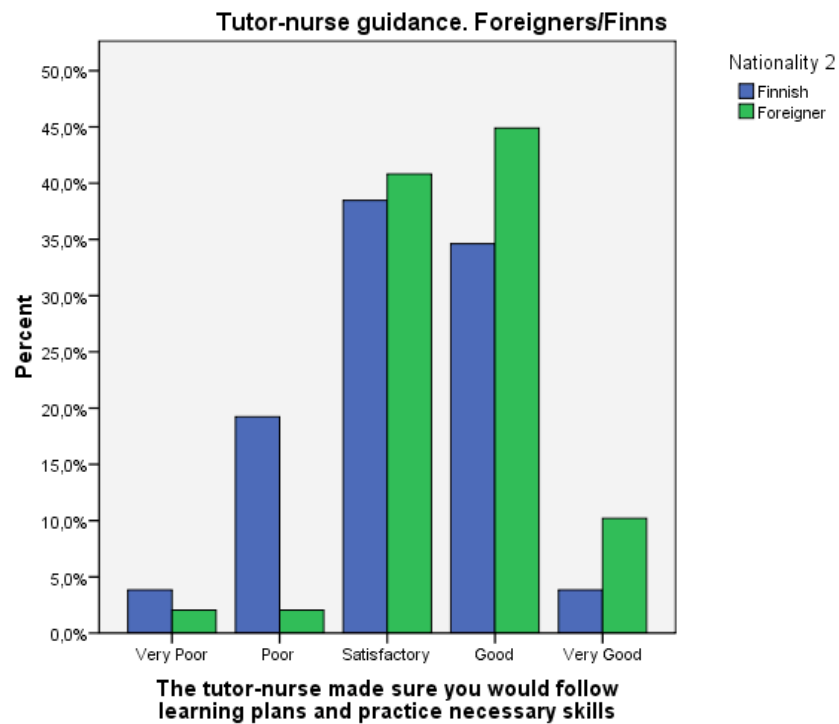


Fig. 7: Tutor-nurse being active in following student's learning path

Nurses' guidance

The mean valuation given by students about nurses' guidance was: for Finnish students 3,42, for foreign students 3,00.

Nationality 2		Nurses' guidance
Finnish	Mean	3,42
	N	26
	Std. Deviation	,987
Foreigner	Mean	3,00
	N	48
	Std. Deviation	1,072
Total	Mean	3,15
	N	74
	Std. Deviation	1,056

Tab. 8: nurses' guidance

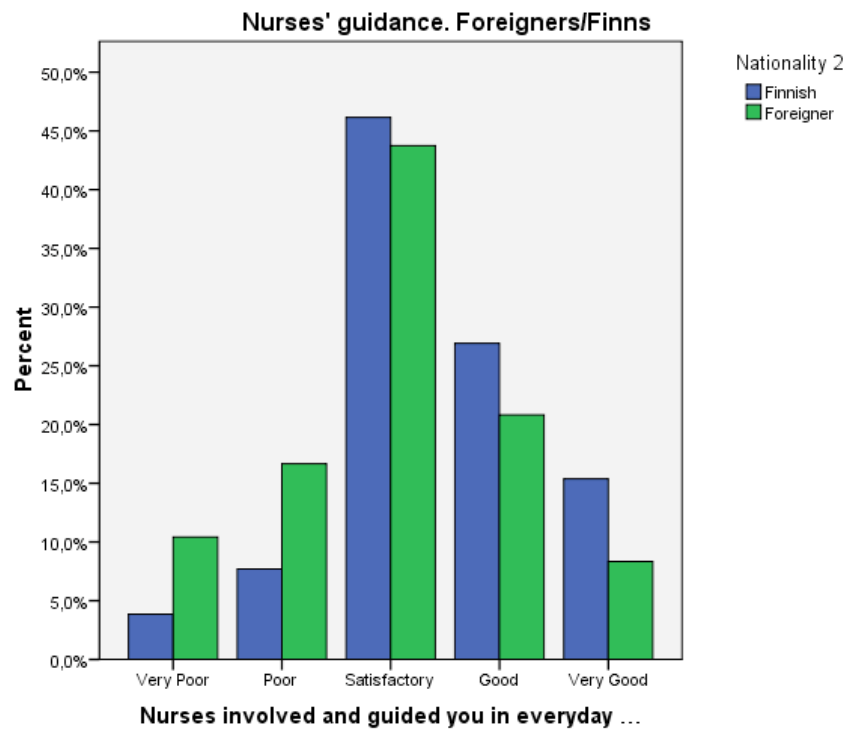


Fig. 8: nurses' guidance

Ward environment

The mean valuation given by students about ward environment was: for Finnish students 3,23, for foreign students 2,98.

Nationality 2		Ward environment
Finnish	Mean	3,23
	N	26
	Std. Deviation	,908
Foreigner	Mean	2,98
	N	49
	Std. Deviation	,878
Total	Mean	3,07
	N	75
	Std. Deviation	,890

Tab. 9: Ward environment

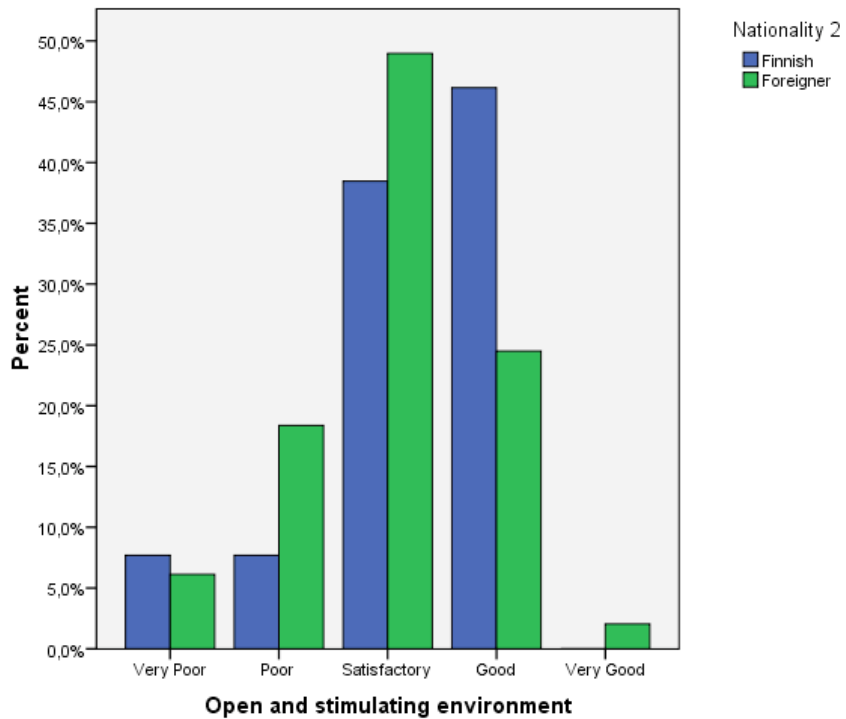


Fig. 9: Ward environment

Facility in communicating thoughts and feelings

The mean valuation given students about the facility in communicating thoughts and feelings was: for the Finnish students 3,04, for the foreign students 2,87.

Nationality 2		Facility in communicating your thoughts and feelings
Finnish	Mean	3,04
	N	26
	Std. Deviation	1,038
Foreigner	Mean	2,87
	N	48
	Std. Deviation	1,024
Total	Mean	2,93
	N	74
	Std. Deviation	1,025

Tab. 10: Facility in communicating thoughts and feelings

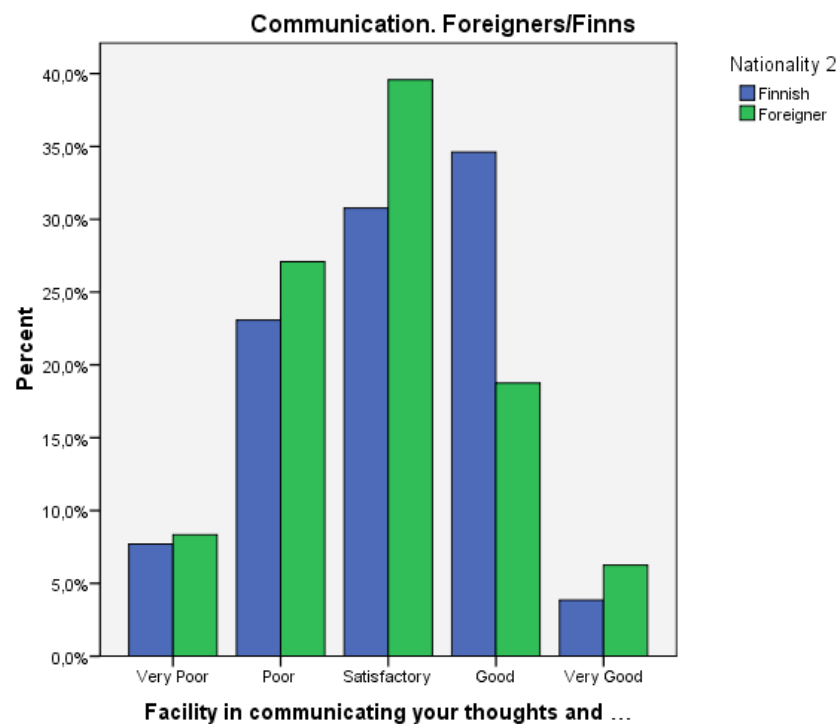


Fig. 10: Facility in communicating thoughts and feelings

Facility in being understood

The mean valuation given students about the facility in being understood was: for the Finnish students 3,72, for the foreign students 3,02.

Nationality 2		Facility in being understood
Finnish	Mean	3,72
	N	25
	Std. Deviation	,980
Foreigner	Mean	3,02
	N	48
	Std. Deviation	,978
Total	Mean	3,26
	N	73
	Std. Deviation	1,028

Tab. 11: Facility in being understood

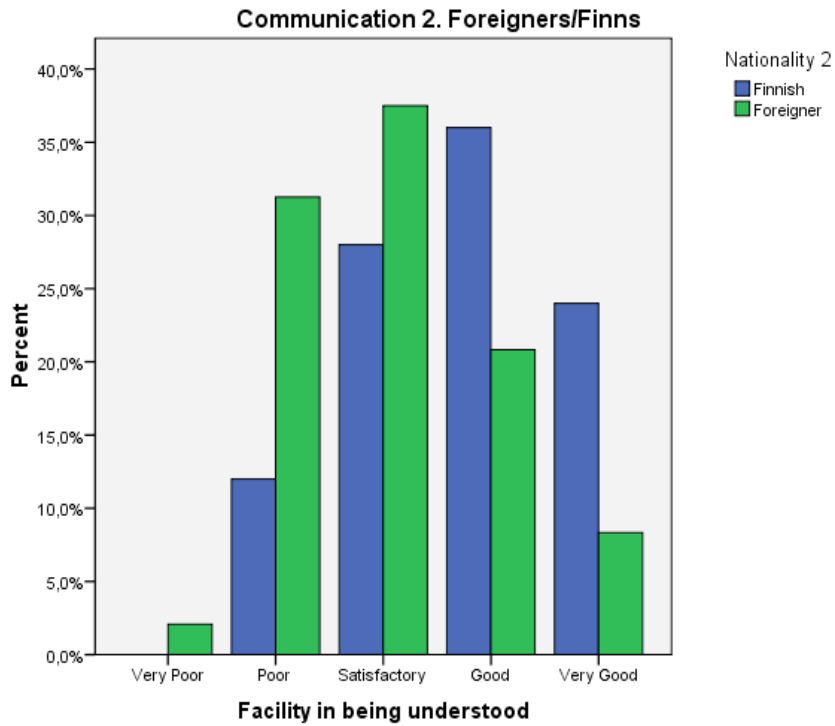


Fig. 11: Facility in being understood

Feeling of being treated equally to Finnish students

The mean valuation of foreign students about the feeling of being treated equally to Finnish students was 2,49.

	N	Mean	Std. Deviation	Std. Error Mean
Feeling of being treated equally to Finnish students	49	2,49	1,244	,178

Tab. 12: Feeling of being treated equally to Finnish students

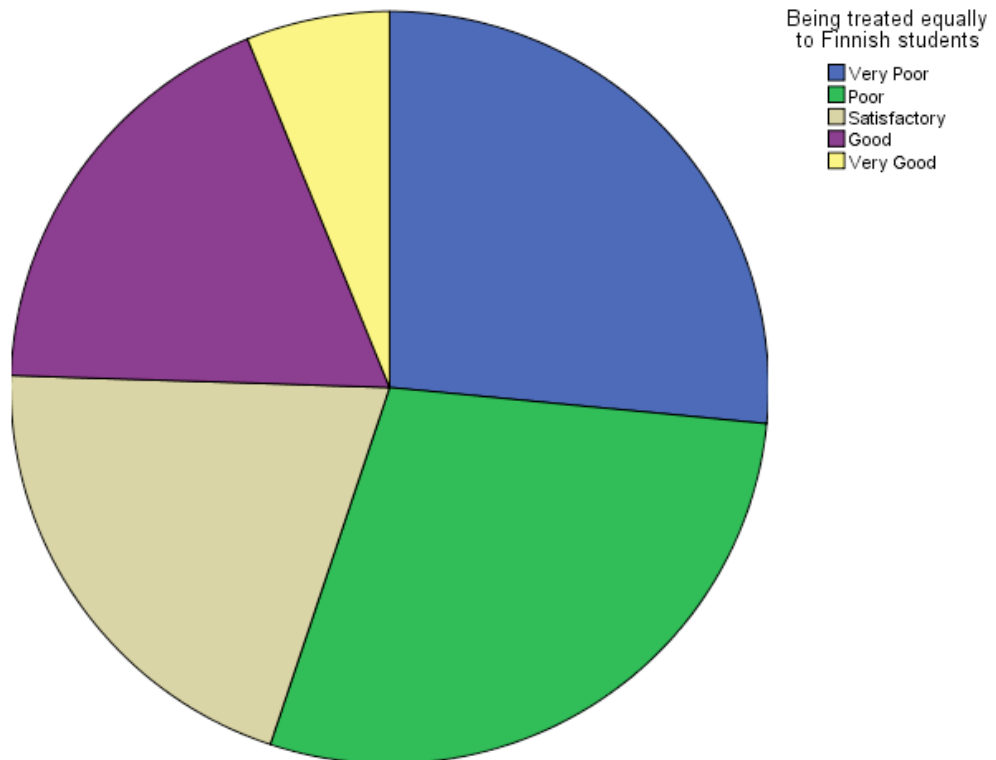


Fig. 12: Feeling of being treated equally to Finnish students

Meeting patients whose mother tongue is the same as students own

The number of foreign students who met patients whose mother tongue was the same as their own was 23. Those who did not meet patients speaking their same mother tongue were 26.

Did you ever meet a patient of your same mother tongue?	Yes	No
	23	26

Tab. 13: Meeting patients whose mother tongue is the same as students own

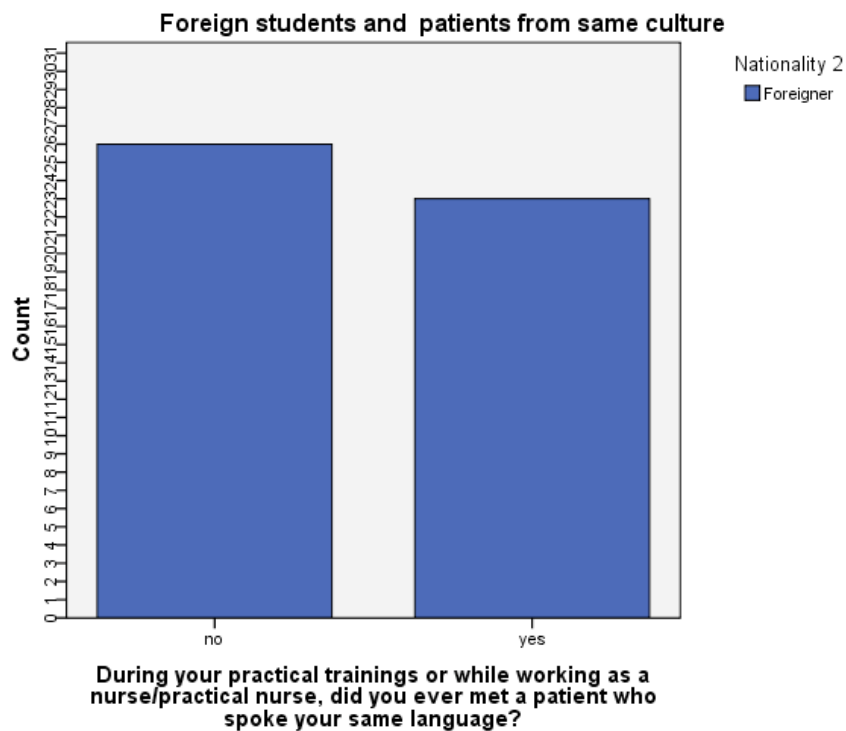


Fig. 13: Meeting patients whose mother tongue is the same as students own

Mean Finnish language skills, according to facility in communicating thoughts and feelings

Means values of foreign students' self evaluation of their own Finnish language skills, were analysed according to their self evaluation of facility in communicating thoughts and feeling during practical placement.

The results clearly show that students, who gave a higher evaluation of their Finnish language skills, gave as well a higher valuation about the facility in communicating their thoughts and feelings.

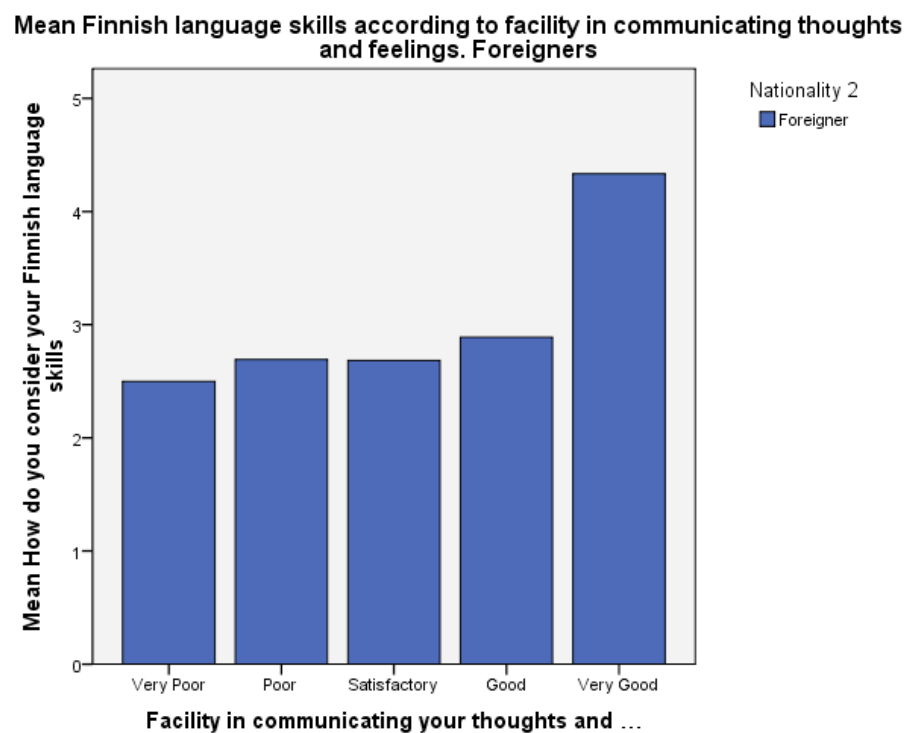


Fig. 14: Language skills/Facility in communicating thoughts and feelings

Means Finnish language skills, according to facility in being understood.

Means values of foreign students' self evaluation of their own Finnish language skills, were analysed according to their self-evaluation of facility in being understood during practical placement.

The results clearly show that students, who gave a higher evaluation of their Finnish language skills, gave as well a higher valuation about the facility in being understood.

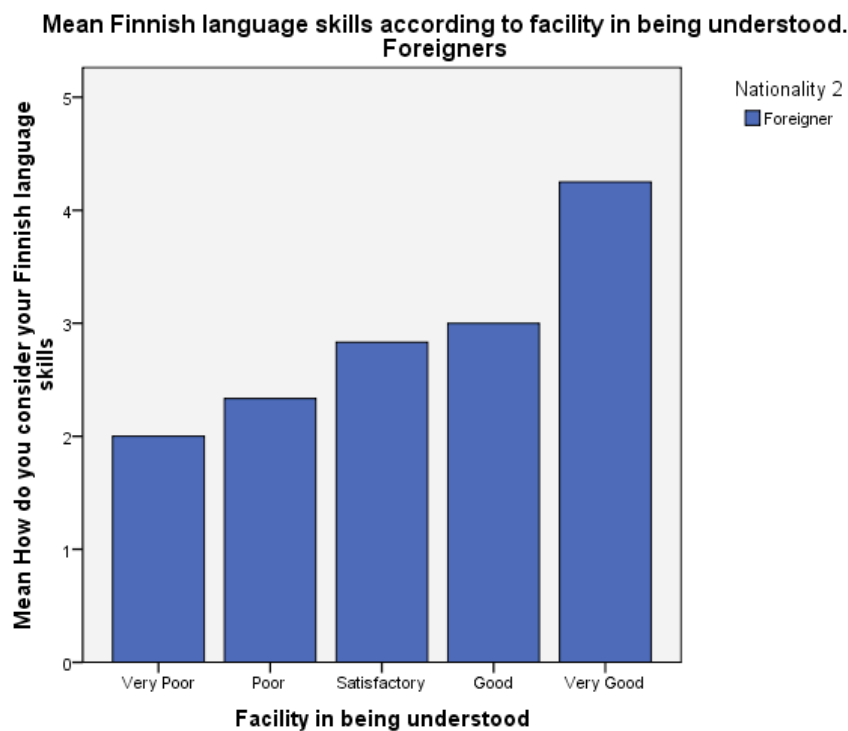


Fig. 15: Language skills/facility in being understood

5.2 Open-answer questions

The questioners included the two following open questions:

- Give an example of a situation during your practical training, when you felt that you cultural diversity was appreciated.
- Give an example of a situation during your practical training, when you felt that you cultural diversity was an obstacle.

Answers were analysed by qualitative means and grouped into different topics. Answers to the first question, giving examples of situations when cultural diversity felt to be appreciated, were divided into the following groups:

- Appreciation of differences between student's own culture and Finnish culture.
- Appreciation of student's culture and openness.
- Staff and patients interested in knowing more about student's country and culture.
- Student's cultural diversity positively considered and used to improve patients' care.

Answers to the second question, giving examples of situations when cultural diversity felt an obstacle, were divided into the following groups:

- Being guided only in Finnish.
- Discrimination by patients.
- Discrimination by nurses.
- Cultural diversity creating misunderstandings.
- Problems in communication, due to lack of Finnish language skills.

Situations when cultural diversity felt to be appreciated.

Examples of situations included in the group "appreciation of differences between student's own culture and Finnish culture" are:

- *"A nurse was comparing on how to take care of old people here in Finland and in my country and she says that in ---- it is nicer way of taking care of old people at home by family members than here in Finland, where old people are taken to old peoples' home to be cared of by strangers."*
- *"In the older peoples' home, it was easy for me to be around the older people, talk to them and see to their needs as this is a everyday occurrence in my culture."*

Examples of situations included in the group "appreciation of student's culture and openness" are:

- *“One good example would be when in practice my mentor appreciated my openness and helping nature.”*
- *“Nurses were constantly asking about my home country. The difference on how I treated visitors who came to visit their relatives was noted because of the welcoming nature of my culture. They appreciated the attention that I gave to the relatives.”*
- *“Respect to old people was appreciated in wherever I went for practice. I didn’t realize that, but I was being told during my final evaluation. I think because it’s my culture to respect old people.”*

Examples of situations included in the group “staff and patients interested in knowing more about student’s country and culture” are:

- *“When I was doing the practical placement in -----, The nurses were very kind. They were interested about the acupuncture... Some elderly people were very nice. They often said that I’m pretty, which made me very happy”*
- *“Most of nurses are friendly to me. They like to share my culture’s health care system. Also when we were in the break, they liked to ask me about everything in my culture.”*
- *“When having a discussion with fellow nurses or a patient and they know something about your country. It feels good to relate to that sense of belonging and appreciation.”*
- *“When I was in home care nursing, clients were so interested to know about my country and they welcomed me so warmly. So it was great experience for me and I thought that cultural diversity is the most precious thing we have.”*

Examples of situations included in the group “student’s cultural diversity is positively considered and used to improve patients’ care” are:

- *“They thought I might speak Turkish and invited me to be with a Turkish patient. It didn’t work because I cannot speak Turkish. It shows the ignorance of nurses but also the good will to consider me as useful.”*
- *“During my paediatric training there was a patient who only spoke English. My supervising nurse trusted me to translate and explain what would happen during*

her stay on the ward, as well as answer questions she had. It was a nice experience where I felt needed and appreciated.”

- *“There was a problematic situation with a patient in the maternity ward. My tutor nurse asked of how such problems are dealt with in my country. I explained how the nurses deal with such situations and she implemented it.”*

Situations when cultural diversity felt to be an obstacle.

Examples of situations included in the group “being guided only in Finnish” are:

- *“Being guided only in Finnish, which I am not good at or which I do not understand and the nurses refused to talk to me.”*
- *“In my past year when I had language barriers and the nurses and the staff kept on talking to me in Finnish language, even though they knew that I was not understanding anything.”*

Examples of situations included in the group “discrimination by patients” are:

- *“Sometime at the elderly peoples’ home one resident would not allow me to care for him. I discussed it with my mentor for the reason he may have. Reason could be gender or cultural or skin colour. The patient was not in confusion nor cognitive impairment.”*
- *“Sometime me being from Africa is a problem to some patients.”*

Examples of situations included in the group “discrimination by nurses” are:

- *“My tutor nurse in the surgical ward was on sick leave. I was allocated other nurses. One of the nurses didn’t approve being with an African student so she asked me to go home.”*
- *“When I was in health care centre, most of the time I hear people talking about me in negative ways. But sometime when I started to speak Finnish, they felt that was not good because I understand what they are talking about me.”*

Examples of situations included in the group “cultural diversity creating misunderstandings” are:

- *“...Africans are relaxed people. In one practice one of the mentors translated that as not being so active.”*
- *“I was told not to do too much for the residents and to let them do some things for themselves. In my culture, the younger generation is obliged to do as much as possible for their elders as a sign of respect and gratitude. We also believe the young should look after the older generation as they have contributed their share to the society.”*
- *“I had patients who liked “small talks”, this was not appreciated so much because the other nurses thought it was a waste of time while I thought it was part of care.”*

Examples of situations included in the group “problems in communication, due to lack of Finnish language skills” are:

- *“The fact that my Finnish language skills were limited. One nurse stopped/interrupted the report since it was in English.”*
- *“For example when I didn’t understand what the patient wanted from me and he/she and I became frustrated because I couldn’t fulfil my nursing task.”*
- *“Finnish language difficulties. When sometimes you want to assist the patient but you don’t know where to start because you can’t understand what they are saying and yet sometimes they need assistance in something small.”*

6. DISCUSSION

6.1 Methodological considerations and limitations

The limited size of the sample does not allow generalizing the results. There are limitations also concerning the questionnaire. One student reported, that it was not possible to give average evaluations considering all the practical placements together, since each of them represents a different and unique situation. This consideration is considered right by the author, who points out that since the results are not going to be generalized, but only read as an overview on students’ experiences, the method chosen gives enough reliability for such purpose.

The questionnaire included also questions, which were not analyzed in the results. It was not done because the author, on a later analysis, considered them not relevant to the research.

The majority of the questionnaires were delivered personally by the author, who in such occasion also explained about the meaning of the research and how to fill up the questionnaire. Many questions came up during these situations. It is therefore possible that the questionnaires delivered by third persons have not been clearly understood.

Carrying out a pilot study would have certainly improved the reliability of the final results.

The question “feeling of being treated equally to Finnish students” was asked only to foreign students. Looking at it afterward, the author’s opinion is that it would have been correct to ask instead a similar addressed both to Finnish and foreign students, for example “I feel that Finnish and foreign students were treated equally”.

It is possible that the creation of the questionnaire and the whole research have been influenced by author’s own experience. On one side this allows a deeper view of the reality researched, on the other it might tend be more “favourable” toward foreign students as he sees himself as one of them.

Answers to the questions reflect students feeling and impressions, which does not necessarily represents the full reality of the situation. From this study completely lacks the nurses’ point of view, which has been excluded for a matter of time and resources. Therefore the results do not represent a complete reality but only one side of it. To start to fully understand the interactions between foreign students and local staff, it is indispensable to connect the current research with a similar one considering the nurses’ experiences about this same topic.

6.2 General discussion of the findings

The results from the analysis of the close-answer questions show that foreign students in eight of the eleven questions evaluate their experiences in practical settings lower than Finnish classmates. In three questions foreign students gave higher mean evaluations than the Finnish students:

- “Plan about your duty and goals”, where Finnish students give a mean evaluation of 3,42 and foreign students 3,73. (Table 5)
- “Plan about daily tasks and learning objectives”, where Finnish students gave a mean evaluation of 3,35 and foreign students 3,63. (Table 6)
- “The tutor-nurse made sure that you would follow learning plans and practice necessary skills”, where Finnish students gave a mean evaluation of 3,15 and foreign students 3,59. (Table 7)

A difference in the mean evaluation major than 0,5 between Finnish students and foreign students, was noticed in three questions, in all of which Finnish students gave higher evaluation than foreign students:

- “Communication with patients”, with a difference of 1,04. (Table 3)
- “Possibility to be in contact with the patients”, with a difference of 0,97. (Table 4)
- “Communication with other nurses”, with a difference of 0,52. (Table 2)

In no question Finnish students gave a mean evaluation lower than 3 (satisfactory).

Foreign students gave a mean evaluation lower than 3 (satisfactory) in three questions:

- “Open and stimulating environment”, with a mean evaluation of 2,98. (Table 9)
- “Facility in communicating your thoughts and feelings”, with a mean evaluation of 2,87. (Table 10)
- “Feeling of being treated equally to Finnish students”, with a mean evaluation of 2,49. (Table 12)

An interesting finding is that among the questions which were asked both to Finnish and foreign students, both gave the mean lowest evaluation in the same question: “facility in

communicating your thoughts and feelings” (Table 10). Finnish students’ mean evaluation was 3,04 and foreign students’ mean evaluation was 2,87.

Otherwise the question where foreign students gave the lowest evaluation was “feeling of being treated equally to Finnish students” (Table 12), with a mean evaluation of 2,49. This question was not asked to Finnish students.

From the analysis of the answers to the open questions, results that cultural diversity can be as much an advantage as an obstacle. When it acts as an advantage, it is so because students, patients and nurses, are open to confrontation. They create a dialogue, whereby they are able to see each other’s culture and differences, without judgment. Students gave many examples of this kind of exchange of information and experiences. There are also examples of a further step, when thanks to this openness, tutor and nurses trust the foreign student and give her/him more responsibilities, often highlighting and positively using student’s cultural diversity for the improvement of patients’ care. Quite common was the example of foreign students acting as interpreters. Out of 49 students, 23 reported having met at least once, patients whose mother tongue was the same as their own (Table 13, Figure 13).

Situations when cultural diversity was an obstacle highlight a refusal or impossibility of confrontation between student and nurses or student and patients. The cause for the impossibility or refusal of this confrontation is often reported to be language barriers, both on the side of students, whose Finnish language skills are not good enough and on the side of nurses and patients, when they do not speak English. In a cross analysis of mean Finnish language skills (as self-reported by the foreign students) and evaluation of “facility in communicating your thoughts and feelings” (Figure 14) and “facility in being understood” (Figure 15), it results clear that students having better Finnish language skills, gave also a higher evaluation when asked about the facility of being understood and expressing their thoughts and feelings while in practical settings. In some cases students also reported feeling discriminated by nurses and by patients. To the question “Feeling of being treated equally to Finnish students” (Table 12), the mean evaluation given was 2,49.

6.3 Conclusion and implications

This study has shown that foreign students encounter more problems than their Finnish colleagues, while carrying out their practical placement in Finland. The most common reasons for such problems are: language barriers; cultural differences, which reflect on different conceptions regarding the way of working and caring for the patients; prejudice toward foreign students.

It must be considered that when asked to give a valuation, each person bases it on her/his own expectations. It is probable that students from different cultures have different expectations regarding the topics mentioned in the questionnaire. This might be proved by the fact that the only questions where Finnish students gave a lower mean evaluation are three and they are all about the planning of their practical period. It might be explained by the fact that Finnish culture considers planning more important than many other culture do.

The questions with the highest difference in evaluation between Finnish and foreign students are the ones about the “communication with patients” and “possibility to be in contact with the patients”, which at the same time was also the ones where Finnish students gave the highest evaluations. This might show that in Finnish culture expectations for this aspect of the nurses’ work are lower compared to other cultures.

The best resources to avoid problems and misunderstandings in clinical settings and to use cultural diversity as a resource are: good language skills and development of cultural sensitivity in nursing students. This way it will be easier to create the intercultural dialogue through which information is exchanged, knowledge of each other is enhanced and patient care is improved.

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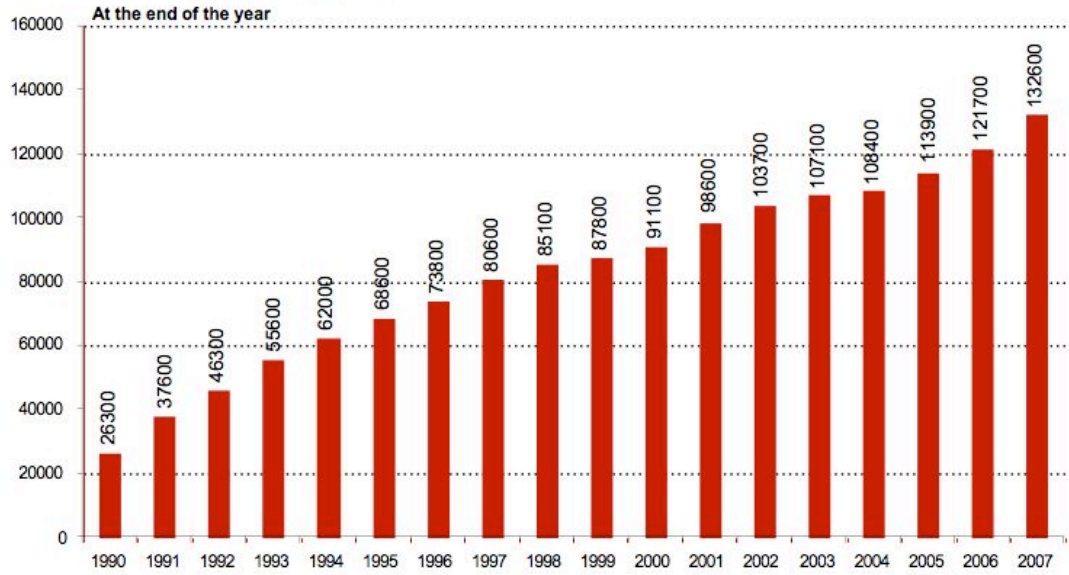
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Appendix 1

Foreign Citizens in Finland 1990–2007



Source: Population Register Centre

Appendix 2

Perusasteen jälkeisen tutkintotavoitteisen koulutuksen ulkomaalaiset¹⁾ opiskelijat koulutussektoreittain koulutusalan (opetushallinnon luokitus) mukaan 2007

Koulutusala	Koulutussektori							
	Yhteensä	Lukio-koulutus	Ammatillinen koulutus		Ammattikorkeakoulu-koulutus		Yliopisto-koulutus	
			Perus-koulutus	Lisä-koulutus ²⁾	Perus-koulutus	Jatko-koulutus ³⁾	Perus-koulutus	Jatko-koulutus ⁴⁾
Yleissivistävä koulutus	1 748	1 748	-	-	-	-	-	-
Humanistinen ja kasvatustieteiden ala	1 006	-	35	31	1	-	664	275
Kulttuuriala	1 130	-	215	37	218	-	496	164
Yhteiskuntatieteiden, liiketalouden ja hallinnon ala	4 481	-	938	503	1 785	37	918	300
Luonnontieteiden ala	1 493	-	208	22	404	-	650	309
Tekniikan ja liikenteen ala	6 550	-	2 196	927	1 841	23	1 053	611
Luonnonvara- ja ympäristötieteiden ala	655	-	289	106	18	-	162	80
Ruokailu-, terveys- ja liikunta-ala	2 447	-	1 113	300	724	-	134	276
Matkailu-, ravitsemis- ja talousala	1 965	-	1 130	475	344	10	3	3
Muu koulutus	1	-	1	-	-	-	-	-
Ulkomaalaiset opiskelijat yhteensä	21 476	1 748	6 124	2 301	5 336	70	3 980	1 917
Ulkomaalaisten osuus kaikista opiskelijoista, %	3,1	1,5	3,3	2,8	4,1	2,0	2,6	8,0
Kaikki opiskelijat yhteensä	691 320	115 253	185 450	81 029	129 853	3 431	162 196	24 108

¹⁾ Muut kuin Suomen kansalaiset.
²⁾ Ammatti- ja erikoisammattitutkinnot.
³⁾ Ylemmät ammattikorkeakoulututkinnot.
⁴⁾ Lisensiaatinkoulutus, tohtorinkoulutus ja lääkärin erikoistumiskoulutus.

Päivitetty 23.1.2009

Appendix 3

Dear Student

I am asking you to take part in a research I am conducting. I am a nursing student from Turku University of Applied Sciences at Salo Unit. I am working on my bachelor thesis: "Foreigners Studying Nursing in Finland: a Study about Experiences from Practical Trainings". The aim of my research is to find out what problems foreign students in nursing face during clinical practice. I hope that the results of this research will be useful to all the students and staff working in multicultural environments. I also believe that it might help to improve International Bachelor Degree Programs n Nursing.

This research is conducted as a quantitative and qualitative study. The questionnaire contains closed and open questions. The target groups are the foreign and Finnish nursing students studying at International Bachelor Degree Programmes in the different University of Applied Sciences in Finland.

I ask you to kindly answer the questions below; it will take about ten minutes. The information obtained from the questioners will be handled completely in confidence and anonymously. The finished thesis will be placed for viewing at the library of Turku University of Applied Sciences Salo Unit (Ylhäistentie 2, Salo). At your request I will also send the finished thesis for your university.

Lecturers Heikki Ellilä (Heikki.Ellila@turkuamk.fi) and Seija Alho (Seija.Alho@turkuamk.fi) will be instructing me on conducting this research.

Thank you for your participation. If you want further information please contact me.

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1. Age _____

2. Female
Male

3. Nationality _____

4. How many times have you had practical trainings in Finland? _____

Please for each one specify below the duration in weeks and give an evaluation from one to five

Practical Training	Duration (weeks)	Evaluation				
		Very poor	Poor	Satisfactory	Good	Very Good
I	_____	1	2	3	4	5
II	_____	1	2	3	4	5
III	_____	1	2	3	4	5
IV	_____	1	2	3	4	5
V	_____	1	2	3	4	5
VI	_____	1	2	3	4	5
VII	_____	1	2	3	4	5
VIII	_____	1	2	3	4	5

The following questions are all about your experience during the practical trainings you have mentioned above. Please answer by giving an evaluation from one to five

	Very Poor	Poor	Satisfactory	Good	Very good
5. Communication with mentor-nurse	1	2	3	4	5
6. Communication with other nurses	1	2	3	4	5
7. Communication with patients	1	2	3	4	5
8. Possibility to be in contact with patients	1	2	3	4	5
9. Plan about your duties & goals	1	2	3	4	5
10. Plan about daily tasks and learning objectives	1	2	3	4	5
11. The mentor made sure you would follow learning plans and practice necessary skills	1	2	3	4	5
12. Other nurses involved and guided you in everyday work	1	2	3	4	5
13. Open and stimulating environment	1	2	3	4	5

14. Facility in communicating your thoughts and feelings 1 2 3 4 5

15. Facility in being understood 1 2 3 4 5

Please only foreign students answer the following questions

16. Feeling of being treated equally to Finnish students 1 2 3 4 5

17. How do you consider your Finnish language skills? 1 2 3 4 5

18. During your practical trainings or while working as a nurse/practical nurse, did you ever meet a patient who spoke your same language? Yes No

If yes, how many times? _____

19. Which year did you arrive to Finland? _____

20. Which year did you start to study the bachelor DP in Nursing? _____

Please only foreign students answer the following questions

21. Give an example of a situation during your practical trainings, where you felt that your cultural diversity was appreciated

22. Give an example of a situation during your practical trainings, where you felt that your cultural diversity was an obstacle

THANK YOU. BY ANSWERING TO THIS QUESTIONER YOU HAVE HELPED IMPROVING KNOWLEDGE ABOUT MULTICULTURAL NURSING