SUBJECT TEACHING GUIDE

Qualification: DEGREE IN NURSING
Subject: Culture and Health

Code: 27969

Subject Description and Context
This subject seeks to boost the intercultural competences of nursing students. Moreover, it prepares them to respond to the growing demand for care for people with different cultural background and ensures they can work in environments or with people with a different professional culture.

Entry Requirements/Recommendations
Students wishing to take this subject must demonstrate a basic knowledge of English.

TEACHING STAFF

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SPECIFIC COMPETENCES
C1 To act taking into consideration diversity and multiculturalism, so as to be capable of working in other professional cultures and of providing culturally sensitive care.

LEARNING OUTCOMES
RA 1 Explains the effect of culture on human relations.
RA2 Uses the models of cultural analysis to be more aware of their own culture and that of others.
RA3 Identifies false beliefs and stereotypes around immigration.
RA4 Identifies how culture influences care and people’s health.
RA5 Identifies how culture influences professionals and the health system.
RA6 Describes the experience of cultural shock and its repercussions for health.
RA7 Demonstrates sensitivity and empathy for people who have immersed in a different and dominant culture.
RA8 Identifies strategies for preventing cultural conflict with patients from other cultures.
RA9 Implements strategies to provide care sensitive to culture.
RA10. Participates in collaborative learning and shows a respectful attitude in class.

CONTENTS

UNIT I: INTRODUCTION TO CULTURE AND INTERCULTURAL COMPETENCE
1.1. What is culture?
1.2. Culture as a dynamic process
1.3. Generalisations and stereotypes
1.4. Perception and unconscious cultural biases
1.5. Culture and its influence on health
1.6. What is Intercultural competence? Why intercultural competence in nursing?

UNIT II: INTERCULTURAL COMMUNICATION
2.1. Communication styles
2.2. The role of communication styles in cultural conflicts

UNIT III: CULTURAL ANALYSIS MODELS AS SUPPORT RESOURCES
3.1. Introduction to models of cultural analysis
3.2. Hofstede cultural dimensions
3.3. Lewis’s LMR model

UNIT IV: MIGRATORY PROCESSES IN A GLOBALISED WORLD AND CULTURE SHOCK
4.1. Migratory processes
4.2. Social perception of immigration: myths, beliefs and rumours
4.3. Cultural shock and/or acculturative stress
4.4. Repercussions of migratory processes on health
4.5. Nursing care in migratory processes

UNIT V: PROVISION OF CARE SENSITIVE TO CULTURE
5.1. Intercultural nursing Models
5.2. Health Beliefs
5.3. Transcultural perspectives throughout the life cycle
   • Childhood care and culture
   • Care for the elderly through different cultures
   • Maternity and culture
   • Transcultural aspects to pain
   • Death in different cultures
5.4. Intercultural conflicts in society and in the health system: from tolerable to intolerable
UNIT VI: THE DIFFERENT CULTURES OF HEALTH SYSTEMS

6.1. What is professional culture?
6.2. Social culture and its influence on health systems
6.3. Employment immersion in a different professional culture. Response strategies
6.4. Micro, meso and macro analysis as a strategy for analysing professional care practice

UNIT IX: ACCULTURATION OF INTERNATIONAL STUDENTS

<table>
<thead>
<tr>
<th>THEMED UNIT</th>
<th>TEACHING STAFF</th>
<th>HOURS</th>
<th>SEMINAR HOURS</th>
<th>PRACTICAL COOPERATIVE ACTIVITIES</th>
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<td>6</td>
<td>Jagoba Zarandona Calvo</td>
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<td>TOTAL</td>
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<td>41</td>
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</table>

METHODOLOGY

This subject employs the following teaching methodologies:

- Classes:
  Participative methodologies turn the students into active members of the class who are committed to their own learning. Part of the session will involve presentations and participative work accompanied by cooperative/collaborative activities. Teaching strategies such as cultural shock games, analysis of social rumours around immigration, cineforum documentaries, role playing, etc. use fun, reflection and debate to impact personal reference frameworks and enable a reconstruction of intercultural competences. Practical simulation sessions will allow students to experience their future job.

- Cooperative/practical activities:
  Students will meet with people from other cultures to develop their intercultural competences (international students, people attending Spanish classes from Vitoria-Gasteiz, immigrant associations, and others).
**IN-PERSON WORK (45 HOURS)**

<table>
<thead>
<tr>
<th>Masterclass</th>
<th>Laboratory practicals/Workshop</th>
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</thead>
<tbody>
<tr>
<td>41</td>
<td>4</td>
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</tbody>
</table>

**NON-ATTENDED WORK (67.5 HOURS)**

<table>
<thead>
<tr>
<th>Individual work</th>
<th>Group work</th>
</tr>
</thead>
<tbody>
<tr>
<td>37.5</td>
<td>30</td>
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</tbody>
</table>

**TOTAL**

<table>
<thead>
<tr>
<th>ECTS</th>
<th>HOURS</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.5</td>
<td>112.5</td>
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</table>

**EVALUATION SYSTEMS**

**FIRST SITTING: CONTINUOUS EVALUATION SYSTEM**

By signing up for continuous evaluation, students must commit to attending at least 80% of teaching sessions and to completing the scheduled activities. Attendance at the intercultural meeting sessions is mandatory. Students who cannot attend classes must contact the responsible to clarify their situation and to establish the evaluation criteria and those for developing their competences.

The continuous evaluation system comprises the following activities:

- **PORTFOLIO 80%**
  The portfolio is a compendium of academic works which demonstrate students' learning outcomes. Students must take part in an analysis of the classwork and reflect on the personal impact and on the implication of what they have learnt on their clinical practice. The portfolio will conclude with a definition of their own culture. They will be assessed on whether they show evidence of having read books, articles and the media and/or analysed videos. The portfolio can be prepared individually or in pairs.

- **GROUP WORK 15%**
  Students must work on a project about the intercultural perspective of a certain social group or country. The work will be conducted in groups of 5 students. They should introduce the country or culture and address aspects such as maternity, raising children, care for children and the elderly, the perception of health, pain and death, diet, religion, and the type of communication.
CLASSROOM PARTICIPATION 5%

Student participation will be assessed based on their classroom interventions and reflections, contributions of reading material, and proposals and analysis of videos, documentaries and current situations in the media.

The relationship between the competences, learning outcomes, activities and evaluation system is summarised in the following table:

<table>
<thead>
<tr>
<th>COMPETENCES</th>
<th>LEARNING OUTCOMES</th>
<th>EVALUATION ACTIVITIES</th>
<th>% FINAL SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1</td>
<td>RA 1, RA2, RA3, RA4, RA5, RA6, RA7, RA8, RA9</td>
<td>Portfolio</td>
<td>80%</td>
</tr>
<tr>
<td></td>
<td>RA9</td>
<td>Group work on a specific culture</td>
<td>15%</td>
</tr>
<tr>
<td></td>
<td>RA10</td>
<td>Participation in collaborative learning and respectful attitude in class</td>
<td>5%</td>
</tr>
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</table>

WITHDRAWAL FROM CONTINUOUS EVALUATION

Students who have participated in the continuous evaluation system and wish to be evaluated through the final evaluation system must present their withdrawal from continuous evaluation in writing to the teacher who manages the subject within 9 weeks following the start of the subject as per the school's academic calendar, in accordance with art. 8 'Evaluation system' of the Official Basque Bulletin of 13/03/2017.

FIRST SITTING: FINAL EVALUATION SYSTEM

Students who, with good reason (employment issues, gender-based violence, childbirth, adoption, caring for children under three years old under their charge, caring for dependent relatives, students with a disability of 33% or greater, elite athletes, artistic/cultural events requiring travel or a significant commitment, combining their workload with other advanced studies or with their role in politics, trade unions, student representation, associations, NGOs or others), cannot participate in the continuous evaluation system or who have not been able to complete the necessary percentage of classes or the practicals with people from other cultures, may make a request to the subject manager for one final test that comprises 100% of their score.

Those who have attended more than 50% of the sessions will be offered the option of submitting a portfolio that demonstrates their learning outcomes via reading and analysis of literature, analysis of films and videos, and a project about a culture. The session with people from another culture and subsequent analysis are mandatory.

Under the final evaluation system, the following activities will assess the scope of students’ competences:

- PORTFOLIO 80%
  
  The portfolio is a compendium of academic works which demonstrate students’ learning outcomes. Students must take part in an analysis of the classwork and reflect on the personal impact and on the implication of what they have learnt on their clinical practice. The portfolio will conclude with a definition of their own culture. They will be assessed on whether they show evidence of having read books, articles and the media and/or analysed videos.
GROUP WORK 20%

Students must work on a project about the intercultural perspective of a certain social group or country. The work will be conducted in groups of 5 students. They should introduce the country or culture and address aspects such as maternity, raising children, care for children and the elderly, the perception of health, pain and death, diet, religion, and the type of communication.

The relationship between the competences, learning outcomes, activities and evaluation system is summarised in the following table:

<table>
<thead>
<tr>
<th>COMPETENCES AND LEARNING OUTCOMES</th>
<th>ACTIVITIES/EVALUATION</th>
<th>% OVERALL SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1</td>
<td>Portfolio</td>
<td>80%</td>
</tr>
<tr>
<td>RA 1, RA2, RA3, RA4, RA5, RA6, RA7, RA8, RA9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RA9</td>
<td>Project on a specific culture</td>
<td>20%</td>
</tr>
</tbody>
</table>

Students who do not attend the exam or final tests will be graded as “Not submitted”.

RESITS: GUIDANCE AND WAIVER

Students who attend resits, having already participated in continuous evaluation, will retain their score for participation in collaborative learning and respectful attitude in class. They will resubmit the failed part, whether the portfolio or the project about a specific culture, correcting these based on the feedback from the first sitting.

Students who resit a final evaluation will do so under the same conditions and requirements as those for the final evaluation in the first sitting.

Students who do not attend the exam or fail to submit the final evaluation activities in the resit will be graded as “Not submitted”.

Students who do not pass the subject may not carry over their score for the evaluation strategies passed into the next academic year.

INFORMATION SOURCES

Core bibliography

Further reading
* Ruiz de Alegría B, Lara P, Rodríguez I, Ocejo M. To learn from others: with regard to a cross-cultural investigation Metas de Enfermería. 2006; 9 (9): 22-6.

**Electronic resources**
* Index Foundation http://www.index-f.com/
* Association for Foreign Professionals in Álava. http://www.prestaturik.com/
* IMISATE website for the integration of the immigrant population in the Basque community healthcare system from a transcultural perspective http://www.ehu.es/imisate/asociaciones.html
* Country comparison by Hofstede https://www.hofstede-insights.com/country-comparison/

**COMMENTS**
Various documentation related to the subject will be made available to students on eGela at the start of the course.

**TUTORIALS**
Requests for tutorials with the subject teaching staff should be made by email to the subject manager: elena_delorenzo@ehu.eus Tutorials should ideally be requested for groups of 3-4 students. Tutorials are not intended to substitute class attendance.