

Embracing our differences



I spent much time thinking about this issue of *Imprint* and the state of “Cultural Competence” in the education of today’s nursing students.

I have often found myself engaged in discussion with students and practicing nurses about how to best implement attention to cultural issues in a manner that best reflects consideration of personal beliefs and awareness of cultural differences.

First, it appears that cultural competence is often mistakenly interchanged with diversity. Diversity is a very broad term, and usually reflects specifics regarding national origin, gender, age, race, ethnicity, capability, religion, socioeconomic status, values, sexual orientation, skills, and life experience, amongst other characteristics. Practicing cultural competence ensures that consumers (patients, employees, etc.) can expect consideration of their individuality within the context of their culture.

Second, while both are of the utmost importance for students to learn as they become competent caregivers, cultural competence gives patients, consumers, and coworkers the right to expect consideration for their own individuality within the context of their culture and larger society.

Third, it is crucial that student nurses incorporate cultural differences as part of their basic patient assessment. As students, we are taught to check vital signs, complete a head-to-toe assessment, and include pain as the fifth vital sign, but what of cultural and socioeconomic issues? It is paramount that nursing students in our nation understand that until we complete a cultural assessment, we will fall short of providing complete care for our patients.

Throughout your nursing school experience, you will hear terms like “cultural competence,” “diversity,” “change agent,” and “patient advocate.” These terms can seem abstract to first year students as they devel-

op the skills essential to becoming effective professional nurses. With continued emphasis of these components in nursing college curricula around the country and the world, we can be confident that today’s nursing students will become skilled professionals, culturally competent nurses who are educated to respect and embrace individuality and diversity.

The 2005-2006 NSNA Board of Directors made a commitment to educate others regarding Culturally Competent Nursing, and has supported efforts to embrace individual and cultural differences. As you have seen in past issues of *Imprint*, several articles have appeared in both Spanish and English. NSNA President Rebecca Wheeler has visited colleagues in Puerto Rico, Canada, and in Taipei, Taiwan during the International Council of Nurses’ Congress to encourage greater cooperation among nursing students on global health issues. This reflects NSNA’s commitment to emphasize the importance of local, state, national, and global cooperation on issues that impact healthcare.

In this issue of *Imprint*, nursing leaders and students speak to the essential need of cultural competence in empowering student nurses as “active learners” in this process.

Hopefully, in those fleeting moments between attending lectures or studying for exams, you can find time to read the articles in this issue of *Imprint*. It will most assuredly clarify any questions that you may have regarding cultural competence.

Finally, I hope to see you all at the National Student Nurses’ Association Annual Convention in Baltimore, Maryland, April 5-9, 2006 for fun and fellowship with students from around the nation!

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