

# PUTTING LEININGER'S NURSING THEORY "CULTURE CARE DIVERSITY AND UNIVERSALITY" INTO OPERATION IN THE CURRICULUM - PART 1

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## ABSTRACT

*The culturally diverse South African society necessitates inclusion of transcultural nursing in the curriculum. This article focuses on research regarding the putting of Leininger's nursing theory into operation in the curriculum to provide a scientific base for the inclusion of such nursing. The research process and results are discussed.*

## OPSOMMING

*Die multikulturele aard van die Suid-Afrikaanse samelewing noodsaak insluiting van transkulturele verpleegkunde by die kurrikulum, gegrond op 'n verpleegteorie. Hierdie artikel is gerig op navorsing ten einde Leininger se verpleegteorie in die kurrikulum te operasonaliseer. Die navorsingsproses en resultate word deur die outeur bespreek.*

*How can Leininger's Nursing Theory "Culture Care Diversity and Universality" be operationalized in the curriculum?*

## Aim

The aim of the study was to gain insight into culturally congruent nursing education by means of an exploratory study. Mouton and Marais (1992:45) regard willingness to explore new ideas and suggestions as essential for a good exploratory study.

## Goal

The goal was to promote culturally congruent care through formulation of guidelines for the operating of Leininger's nursing theory, in order to include transcultural nursing in the curriculum.

## Objectives

The objectives were:

- to analyze and evaluate Leininger's nursing theory.
- to operationalize Leininger's nursing theory in the curriculum.

## Research design and method

A flexible, non-empirical, exploratory research design involving the method of theoretical reflection, was utilized. Steyn (1981:34) explains this method as the gathering and systematic critique of data by means of deductive and inductive thought processes. Such a study, according to Engelbrecht (1989:61), is interpretative-theoretical in nature.

Data were gathered by means of a literature study. According to Mouton and Marais (1992:45) a literature study can be applied successfully to an exploratory study. Expert publications regarding the relationship between culture and the curriculum, as well as culturally congruent care, were subjected to analysis and critique. Data gathering and analysis were done simultaneously. A conceptual framework (Figure 1) and data

## INTRODUCTION

The culturally diverse South African society necessitates a new perspective on nursing education and curriculum development. There is increasing need for transcultural nursing in the curriculum to enable graduates to render congruent cultural nursing care. Successful health care delivery based on primary health care, is dependent on congruent cultural nursing care (Sekgobela 1986:30; MacDonald 1987:32); Burrows (1983:478) regards an ethnocentric curriculum as a form of institutionalized racism resulting in inadequate nursing care.

Man is acknowledged as a cultural being in the philosophies of many nursing schools. Chater (1975:429) argues that a philosophy is rarely reflected in all phases of the curriculum although a nursing theory guides all phases of, and provides a scientific base for, the curriculum (Aggleton & Chalmers 1989:24; Brower & Baker 1976:686).

With reference to transcultural nursing, Brink (1990:523) says "*cultural diversity remains elusive without a theoretical framework*". Farr (1978:294-299) recommends that man as a cultural being be acknowledged in nursing school philosophies and that inclusion of cultural content in the curriculum be based on an appropriate nursing theory.

## IMPLICATIONS OF LEININGER'S NURSING THEORY FOR THE CURRICULUM

The focus of this theory is to discover care diversities and universalities in order to provide culturally congruent care (Leininger 1991a:11 & Leininger 1991b:39). Putting Leininger's nursing theory into operation therefore can be instrumental in preparing the nursing student to deliver congruent cultural care. The existing ethnocentric curriculum, based mainly on Euro-American values, thus will make way for a curriculum which reflects not only a biomedical, but also a sociocultural perspective on health related matters. Because a nursing theory influences all phases of the curriculum, the use of Leininger's nursing theory should result in bringing congruent cultural nursing education to a multicultural student population.

## LEININGER'S NURSING THEORY IN OPERATION IN THE CURRICULUM

Operation of this nursing theory was accomplished by research involving theoretical reflection.

## Research question

The research question on which the study was based, is:

reduction plan (Table 1) were developed to guide data gathering and analysis.

## RESEARCH PROCESS

The research was completed in four phases:

### Phase 1

Phase one comprised description, analysis and evaluation of Leininger's nursing theory and included three steps:

Step 1 Description of Leininger's nursing theory.

Step 2 Development of a conceptual framework for analysis and evaluation of the theory (Table 2).

Step 3 Analysis and evaluation of the theory by means of the conceptual framework developed in step 2.

Analysis and evaluation of the nursing theory resulted in insight into its strengths as an appropriate theoretical framework for the inclusion of anthropological concepts and transcultural nursing in the curriculum. Leininger describes cultural and social structure dimensions which influence man's perception of health, sickness and care, as well as nursing's unique position relative to the professional and generic health care systems.

Culturally congruent care is provided by a creative combination of the professional and generic health care systems. This is achieved through three modes of nursing care judgement, decisions and actions namely:- a) culture care preservation\ b) maintenance, accommodation\ negotiation and c) repatterning\ restructuring, in order to preserve, adapt and restructure care values, lifeways and practices (Leininger 1991b:37-38 & 41-44; Stasiak 1991:196). Leininger's nursing theory provides an abstract theoretical framework for the establishment of transcultural nursing in the curriculum but a concrete frame of reference also is required to guide structuring of this component of the curriculum and to facilitate implementation of acquired concepts by the student. This understanding led to the second phase of research which was exploration of Chrisman's expansionist approach.

### Phase 2

During phase two, a literature study was undertaken to explore Chrisman's expansionist approach (1990:2-3); the author suggests that this humanist approach complements Leininger's nursing theory. Whereas Leininger's nursing theory is abstract and focuses on transcultural nursing as a formal field of study, the expansionist approach is a client centred one, through which the client can be approached (Chrisman 1991a:2-5). Within the context of this study, the expansionist approach can be used to:

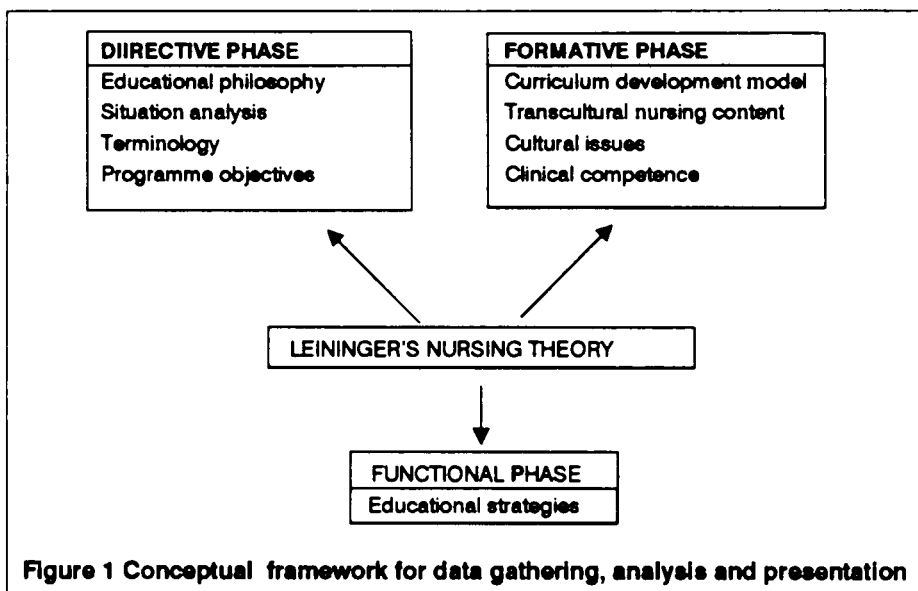


Figure 1 Conceptual framework for data gathering, analysis and presentation

- organize transcultural nursing curriculum content and identify associated clinical competence according to the principles of congruent cultural care (ie knowledge, respect and negotiation).
- include both the biomedical and socio-cultural perspectives on health matters in the curriculum, therefore putting an end to ethnocentrism in nursing education.
- ensure congruent cultural care by using the nursing process within the cultural context during clinical teaching.

### Phase 3

Phase three comprised the putting of Leininger's nursing theory into operation in the curriculum. This phase was completed in three steps.

Step 1 A literature study regarding the merit of curriculum development based on a nursing theory and implications of a nursing theory for the curriculum was done.

Step 2 Development and description of a conceptual framework for data gathering, -analysis and -presentation.

(Figure 1), as well as a data reduction plan (Table 1) was drawn up.

Step 3 Data gathering and analysis by means of the conceptual framework (Figure 1) and data reduction plan (Table 1) was carried out.

### Phase 4

Phase four involved the formulation of guidelines for including transcultural nursing in the curriculum.

## RESULTS

The study resulted in the formulation of such guidelines and a brief overview of these guidelines is presented (See Table 3).

### General

Nursing theory as a foundation for curriculum development has implications for the directive, formative and functional phases of the curriculum.

### Directive phase

An analysis of the situation is undertaken to determine the social characteristics and health

Table 1 Data reduction

CATEGORY	CODE
Directive phase	1 Educational philosophy 2 Situation analysis 3 Terminology 4 Programme objectives
Formative phase	5 Curriculum development model 6 Transcultural nursing content 7 Cultural issues 8 Clinical competence
Functional phase	9 Educational strategies

related needs of the main cultures served by the nursing school. This analysis should be based on the seven social and cultural structural dimensions described by Leininger namely; cultural values and lifeways, as well as technological, religious\philosophical, kinship\social, political\legal, economic and educational factors.

The philosophy of the nursing school needs acknowledge man as a cultural being. The inclusion of transcultural nursing in the curriculum, should be based on Leininger's nursing theory "Culture Care Diversity and Universality", and be complemented by Chrisman's expansionist approach.

Leininger's definitions of culture, man, health, nursing and environment may be included in the terminology which serves as a frame of reference for curriculum development and its implementation, as applicable to transcultural nursing.

Culture is regarded as the main concept and the others as subconcepts. Chrisman's definitions of sickness, disease and illness, are appropriate and will result in insight into the universal nature of sickness and its causation in terms of the biomedical versus sociocultural perspectives.

The Programme Objectives for the Education and Training of a Nurse (General, Psychiatric, Community) and Midwife [South African Nursing Council 1988: Paragraph (6)(2)], should reflect the aim of developing the student's ability to render culturally congruent care.

The curriculum therefore must provide for personal and professional development of the student so that, by completion of the course of study, the student will:

- show respect for the dignity and uniqueness of man in his social-cultural and religious context and approaches and understand him as a psychological, physical, social and *cultural* being within this context [South African Nursing Council 1988: Paragraph (6)(2)(m)].
- be able to promote community involvement *within a multicultural context* at any point along the health/disease continuum in all stages of the life cycle. [South African Nursing Council 1988: Paragraph (6)(2)(m)].

#### Formative phase

Inclusion of transcultural nursing content is achieved by a combination of curriculum development models. A course in anthropology is followed by transcultural nursing units of instruction in close association with related nursing subjects. For instance, cultural diversities and universalities regarding pain-experience and its alleviation should form part of the pain module.

STRUCTURE CRITERIA	PROCESS CRITERIA
Historical development.	Semantic integrity and congruence with established general knowledge:
-	Established general knowledge about man and health.
-	Correspondence with a paradigm in nursing and between the theory and it's underlying philo-sophical assumptions.
-	Level of abstraction of concepts.
-	Clarity and consistency of principles, concepts and propositions.
-	Parsimony.
Philosophical assumptions	Coherence:
-	Relationship to other nursing theories.
-	Logical flow from philo-sophical assumptions to propositions.
-	Symmetry and beauty.
Principles and propositions	Pragmatics
-	Utility.
-	Contribution to nursing.
Metaparadigm concepts	

The integrated approach is followed during clinical teaching to enable the student to apply principles of congruent cultural care while attending to the client holistically. The principles of congruent cultural care are knowledge, respect and negotiation (Chrisman 1991b:36).

The anthropology course should include units on:-

#### a) Culture

- Cultural concepts.
- The seven cultural and social structure dimensions of Leininger. These dimensions are cultural universals, but also culturally diverse in nature.

#### b) The relationship between culture and health

- Cultural factors affecting health.
- Perceptions of health and sickness.
- Sickness behaviour, including pathways to health and treatment strategies.

The transcultural nursing units of instruction include:

- a) A comparative study of at least two of the main cultures in the region served by the nursing school, by means of Leininger's seven cultural and social structure dimensions. This is followed by units related to specific nursing subjects. For instance:
  - Ethical issues within cultural context, in

the Ethos and Professional Practice module.

- Cultural beliefs and practices associated with pregnancy and labour, in the midwifery modules.

- b) Subject content to promote self knowledge in the student. Self knowledge includes knowledge regarding personal and professional values the nurse brings to the health care situation and which may lead to stereotyping of and prejudice towards clients.
- c) Subject content related to cultural issues are included in the curriculum in order to promote moral development of the student. Examples of cultural issues are human rights within the cultural context and the effect ethnocentrism has on the quality of nursing care (Leininger 1991a:13; Mattson 1987:207).

One of the principles of cultural congruent care (namely negotiation) implies clinical competence. Clinical competence assumes integration of knowledge, attitudes and skills needed to function as a registered nurse (Mallik 1988:11). Negotiation is a social skill which includes listening to the client's view, explaining the professional view, comparing the two viewpoints and arriving at a compromise for a workable and safe care plan (Chrisman 1990:13-14). Such compromise implies social, communication and higher cognitive skills on the nurse's part. Listening and explaining are communication skills. Comparing involves critical analytical thought processes and compromising implies social skills. Within the transcultural nursing context, these skills are used to develop a negotiated nursing care plan according to Leininger's three modes of nursing ie

**Table 3 Including transcultural nursing in the curriculum: Planning guide**

ACTIVITY	COMPLETED	REQUIRE FURTHER ATTENTION
<p style="text-align: center;"><b>DIRECTIVE PHASE</b></p> <p><b>1 SITUATION ANALYSIS</b> A situation analysis has been implemented by means of Leininger's seven cultural and social structure dimensions, namely: - Technological factors - Religious and philosophical factors - Kinship and social factors - Cultural values and ways of living - Political and legal factors - Economical factors - Educational factors</p> <p><b>2 EDUCATIONAL PHILOSOPHY</b> Acknowledgement has been given to Man as cultural beings The intention to approach the patient holistically within the cultural context, has been stated</p> <p><b>3 TERMINOLOGY</b> The following concepts, as defined by Leininger, are included in the terminology: - Culture - Man - Health - Nursing - Environment The following concepts as defined by Chrisman, are included in the terminology - Sickness - Illness - Disease</p> <p><b>4 PROGRAMME OBJECTIVES</b> The programme objectives include the following intentions: - To develop the student's ability to approach and understand the patient as a cultural being - To promote community development within the cultural context</p>		
<p style="text-align: center;"><b>FORMATIVE PHASE</b></p> <p><b>5 CURRICULUM DEVELOPMENT PHASE</b> Curriculum development model: - A basic anthropology course is included in the curriculum - Transcultural nursing units of instruction that builds upon the anthropology course, are included at strategic points throughout the curriculum - Transcultural nursing is integrated into clinical teaching programmes</p> <p><b>6 SUBJECT CONTENT</b> The basic anthropology course consists of: - Cultural concepts - Overview of the seven cultural and social structure dimensions of Leininger as cultural universals - Cultural factors that influence health - Perceptions regarding health and disease - Sickness behaviour, including pathways to health and treatment strategies The transcultural units of instruction include: - A comparative study of at least two cultures by means of the seven cultural and social structure dimensions - Subject content related to self-knowledge - Cultural issues</p> <p><b>7 CLINICAL COMPETENCE</b> The following clinical skills are included Social skills: - Sociocultural assessment - Negotiation - Assessment of community needs - Conflict management Communication within the cultural context Higher cognitive skills: - Critical analytical thought processes - Professional judgement - Decision making with regard to culture care preservation, accommodation or restructuring Negotiation as an integration of the above skills</p>		
<p style="text-align: center;"><b>FUNCTIONAL PHASE</b></p> <p><b>8 EDUCATIONAL STRATEGIES</b> The educational strategies provide for the following Development of a knowledge base - Utilization of the literature as a source of knowledge - Experiential learning Development of respect - Role modelling - Utilization of human and material resources - Experiential learning Facilitation of meaningful multi-cultural learning experiences - Clinical teaching is based on the principles of experiential learning - Transcultural nursing is applied to the nursing process Multicultural education, taking into account individual differences among students with regard to the following - Learning styles - Perceptions regarding motivation, achievement and reward - Strategies that require group and individual work, are alternated</p>		

judgment, decision making and actions. The nursing student also has to develop skills to perform a political function in the assessment of community health needs and priorities, communicating this information to politicians, as well as conflict management should health care be regarded by the community as incongruent to their needs or priorities (Adlem 1993:17).

**Functional phase**

Educational strategies applicable to transcultural nursing are divided into approaches aimed at the:

- development of a transcultural nursing knowledge base.
- development of respect.
- provision of meaningful multicultural learning experiences.
- provision for individual differences among students.

Educational strategies for the development of a transcultural nursing knowledge base should not be aimed at teaching lists of cultural characteristics which could lead to stereotyping of clients (Germain 1992:3). Stern (1985:177) regards literature and personal experience as appropriate sources for gaining transcultural nursing knowledge. Personal experience can be attained by guest speakers, discussions and culture days (Brink 1990:523; Capers 1992:27; Woolfolk 1990:486-487).

Development of respect can be achieved by strategies such as modelling and utilization of human and material resources, as well as simulation (Stern 1985:182-183). Examples could be observation of the life history of a person of another culture or a Culture Game, simulating culture shock (Stern 1985:182-183; Leininger 1994:220).

Leininger (1991a:5) regards experiential learning as appropriate for transcultural nursing. Kolb's experiential learning cycle (personal experience, reflective observation, abstract conceptualisation and active experimentation) provides a theoretical base for multicultural learning experiences; this in turn provides for cognitive and affective dimensions of learning (Kolb in Holbert & Thomas 1988:30-31). It can be applied to discussions and clinical teaching. Clinical teaching also should be implemented within the cultural context. Anderson (1987:9) writes: "the clinical encounter is a social process in which each party brings a set of expectations and beliefs about the problem at hand. The critical issue here is that both the perspectives of the nurse and the patient and his or her family are legitimate." Gagnon (1983:128) states that clinical placements should provide the student with the opportunity to encounter culturally diverse groups in addition to focus on clinical

specialities. The nursing process should be implemented within the cultural context which implies sociocultural assessment, a negotiated nursing care plan and implementation as well as evaluation, according to the biomedical and sociocultural perspective (Chrisman 1990:11-13).

Individual differences among culturally diverse students include differences in learning styles, as well as diverse perspectives regarding achievement, motivation and reward. Inclusion of transcultural nursing in the curriculum implies multicultural education, taking into consideration cultural pluralism, rather than imposing Euro-American values on a culturally diverse student population (Slavin 1986:508; Slavin 1991:451; Woolfolk 1990:527).

## LIMITATIONS

The interpretative nature of this study might have resulted in some degree of bias. Although nursing theory influences all phases of the curriculum, the evaluation phase was not included in the study, because it is considered as a separate research project.

Despite the limitations, the study contributes to a thorough exploration of the relationship between Leininger's nursing theory and the curriculum and provides the basis for further research in order to establish transcultural nursing as a formal field of study in South Africa.

## RECOMMENDATIONS

### Continuing education

Personnel development regarding transcultural nursing should be provided for lecturers and nursing practitioners responsible for accompaniment of students.

### Research

It is recommended that research is undertaken into student evaluation within the transcultural nursing context, to enable lecturers to monitor the student's progress towards cultural congruent care. Research into the characteristics and health care needs of the main cultures of the various regions, in order to ensure relevant curricula, is needed.

### Curriculum development

It is recommended that:

- curriculum evaluation be undertaken, guided by the guidelines in this study.
- curriculum development be undertaken within a regional context due to cultural diversity between the various regions
- transcultural nursing be included in the curriculum according to the guidelines (Table 3) formulated for the inclusion of transcultural nursing.

## CONCLUSION

This study focused on the putting of Leininger's nursing theory into operation within the curriculum in order to include transcultural nursing. This was achieved by means of a non-empirical exploratory study. Inclusion of transcultural nursing in the curriculum will result into culturally congruent care and the provision of multicultural education to students.

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