

GUEST EDITORIAL

Cultural and Linguistic Diversity in Nursing Education

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Globalization has changed the world bringing with it a rapid growth of cross-border movement among countries. At the same time, rapid knowledge flow through digital pathways helps people to share information on a global level. The factors influencing cross-border movement are multiple, including political and economic situations of countries, sharing of skills and knowledge, curiosity and adventure in search of new experiences, or having to leave one's home country because of safety reasons. According to the United Nations (2015), the number of international migrants reached 244 million in 2015 (1). The amount represents a 41% increase in immigration from year 2000. At this moment, like never before, facing cultural and linguistic diversity has become a frequent topic of discussion in education, science and politics.

Immigration has a significant influence upon maintaining a sustainable workforce in the field of social and healthcare in many countries (2). According to the World Health Organization (2013), there will be a shortage of 12.9 million healthcare workers in 2035 worldwide (3). This is a key reason why the World Health Organization has a strategic plan to ensure the availability of well-educated nursing workforce in the future. The European strategic directions for strengthening nursing and midwifery include reinforcing nursing education, workforce planning and organizing skill mix, creating positive working environments, supporting professional innovation and developing evidence-based practice (4). In Europe and globally, we are experiencing major changes in the management and practice of the social and healthcare sector. The changes are influenced by the rapid growth of the aging population, major reduction in the number of healthcare workforce in the near future and the financial sustainability of the sector.

One response to these developments in many countries has been the strategic increase of internationalization in the country (5). This involves an emphasis on ensuring global competitiveness by creating multicultural societies. One of the examples of internationalization can be seen in providing inter-

national degree programmes in nursing in a number of universities globally (6). In an earlier study by Pitkääjärvi (2012), it was shown that culturally and linguistically diverse students studying in international degree programmes were highly motivated in their nursing studies (7). However, the study showed that there were challenges at the clinical placements of students causing them to experience distress and social isolation. The students' negative experiences were related to unsupportive clinical learning environments and attitudes by nursing staff. Examples of these negative experiences include students feeling lonely, not trusted or ignored, feeling like outsiders, and not seeing enough equality when comparing their position with national students.

According to the European directives (8, 9), nursing students' education involves up to 50% of clinical practice. Growing in clinical competence involves various elements. In clinical practice, students enter a professional field of new opportunities for learning and growth in their personal professionalism and the holistic care of patients. The clinical learning environment is created of authentic clinical spaces and a safe atmosphere for learning under the supervision of staff nurses taking the position of being students' mentors (10, 11). In earlier studies, it has been shown that mentoring involves the facilitation of students' learning (12), which includes the pedagogical skills of mentors to guide students through the learning process, creating a safe learning environment and strengthening students' professional growth (13, 14). There are unique opportunities for mutual benefits and more profound learning when diverse cultures get together. Cultural competence in mentoring is shown in mentors' cultural awareness of their own culture and culture of the other person, cultural knowledge, cultural sensitivity and cultural skills to mentor students with empathetic communication (13, 14). A recent study with culturally and linguistically diverse nursing students and their mentors demonstrated that mentors evaluated their own competence to mentor such students as very high (15). However, there were challenges found relating to linguistic diversity during cultural mentoring. When the evaluated level of language skills by the mentors was low, the mentors also had little knowledge about the cultural background of their students. Further, they did not integrate cul-

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turally and linguistically diverse students to work together with national students. In addition to this, the mentors needed more support from their colleagues in mentoring (16). The mentors who evaluated their English language as higher and had previously lived and worked abroad, faced less challenges with cultural diversity in mentoring (15).

In holistic education of nursing, cultural and linguistic diversity is an increasingly present and important phenomenon, visible in patients' care and in the growing number of international health-

care professionals and students. With increasing globalization and international movement across countries, it is essential to provide mentors with educational opportunities to develop their cultural mentoring competence. The international mobility and foreign language learning should be encouraged and appreciated in the professional context. The education of cultural mentoring competence can reduce stereotyping of certain cultures, building negative attitudes and misunderstandings in communication.

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