

Cross-cultural Learning and International Collaboration: Evaluation of a Study Tour to Thailand

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Abstract

Purpose: To evaluate cross-cultural learning among Thai staff and host students from the Faculty of Nursing, Mahidol University (MU) and Australian guest students from the School of Nursing and Midwifery, Deakin University (DU), who participated in a study tour.

Design: Descriptive exploratory evaluation.

Methods: Key stakeholders were invited to participate resulting in a convenience sample of seven MU staff, five MU and 22 DU students. Data were collected using mixed methods. Qualitative data were theme analysed and quantitative data were analysed using descriptive statistics.

Main findings: The semi-structured interviews with MU staff, focus group with MU students and free response questions in the online survey with DU students indicated the themes of enhanced and valuable cross-cultural learning and relationship building, the challenges of different social behaviours and the importance of tolerance and acceptance. In the online survey, over 77% ($n = 17$) of DU students reported high satisfaction with their cross-cultural learning on the study tour. The online survey included the validated Miville-Guzman Universality-Diversity scale short form (M-GUD-S). All Australian students reported seeking diversity of contact ($\bar{X} \pm SD = 23.1 \pm 4.4$), relativistic appreciation ($\bar{X} \pm SD = 24.7 \pm 3.9$), and comfort with differences ($\bar{X} \pm SD = 26.2 \pm 3.0$), indicating high levels of openness to cultural diversity and similarity on the M-GUD-S.

Conclusion and recommendations: This study provides an example of an evaluated study tour emphasising cross-cultural relationship building. Findings indicate that nursing education should include opportunities for intercultural exchange among nursing students. Nurses require excellent skills in cross-cultural nursing and relating to meet the future global challenges to health care over the next millennium.

Keywords: cross-cultural learning, evaluation, nursing education, study tour

J Nurs Sci. 2012;30(2):12-21

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การเรียนรู้ข้ามวัฒนธรรมและความร่วมมือด้านเครือข่ายต่างประเทศ: การประเมินผลการทัศนศึกษาในประเทศไทย

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บทคัดย่อ

วัตถุประสงค์: เพื่อประเมินผลการเรียนรู้ข้ามวัฒนธรรมของบุคลากรและนักศึกษาคณะพยาบาลศาสตร์ มหาวิทยาลัยมหิดล กับนักศึกษาพยาบาลจาก School of Nursing and Midwifery, Deakin University ซึ่งเข้าร่วมโครงการทัศนศึกษา (study tour)

แบบวิจัย: Descriptive Exploratory Evaluation

วิธีการวิจัย: เลือกกลุ่มตัวอย่างแบบสะดวก กลุ่มตัวอย่างเป็นผู้ที่เกี่ยวข้องหลัก ได้แก่ บุคลากร และนักศึกษาพยาบาลคณะพยาบาลศาสตร์ มหาวิทยาลัยมหิดลจำนวน 7 คน และ 5 คนตามลำดับ นักศึกษาพยาบาลจาก Deakin University จำนวน 22 คน เก็บข้อมูลโดยใช้วิธีสัมภาษณ์กึ่งโครงสร้าง สันทนากลุ่ม และตอบแบบสอบถาม Miville-Guzman University-Diversity Scale (M-GUD-S) วิเคราะห์ข้อมูลเชิงคุณภาพโดยสรุปเป็นประเด็น (Theme) และวิเคราะห์ข้อมูลเชิงปริมาณโดยใช้สถิติเชิงพรรณนา

ผลการวิจัย: จากผลการสัมภาษณ์โดยใช้แบบสัมภาษณ์กึ่งโครงสร้างกับบุคลากรคณะพยาบาลศาสตร์ มหาวิทยาลัยมหิดล และใช้การสนทนากลุ่มกับนักศึกษา รวมทั้งผลการตอบแบบสอบถามโดยใช้เครื่องมือผ่านระบบออนไลน์ของนักศึกษาพยาบาลจาก Deakin University พบว่า โครงการทัศนศึกษาช่วยส่งเสริมให้เกิดความรู้สึกร่วมกันในการเรียนรู้ข้ามวัฒนธรรม และการสร้างสัมพันธภาพ ความท้าทายในการได้เรียนรู้พฤติกรรมทางสังคมที่แตกต่างกัน และความสำคัญของการอดทนและการยอมรับความแตกต่างของกันและกัน จากการสำรวจผลการตอบแบบสอบถาม พบว่านักศึกษาจาก Deakin University มากกว่า 77% รายงานว่ามีความพึงพอใจสูงกับการได้เรียนรู้ข้ามวัฒนธรรมจากโครงการทัศนศึกษา พบค่าเฉลี่ยในด้านการสื่อสารที่หลากหลาย ($\bar{X} \pm SD = 23.1 \pm 4.4$) ความประทับใจกับสัมพันธภาพ ($\bar{X} \pm SD = 27.7 \pm 3.9$) และการยอมรับความแตกต่าง ($\bar{X} \pm SD = 26.2 \pm 3.0$) ซึ่งสะท้อนถึงการเปิดโลกทัศน์ในระดับสูงของนักศึกษาที่มีต่อความแตกต่างหลากหลายและความเหมือนกันทางวัฒนธรรม

สรุปและข้อเสนอแนะ: การศึกษานี้ถือเป็นตัวอย่างของการประเมินผลโครงการทัศนศึกษา ที่มุ่งการสร้างความสัมพันธ์ข้ามวัฒนธรรม ผลการวิจัยชี้ให้เห็นว่าในการศึกษาพยาบาล ควรจัดให้นักศึกษามีโอกาสแลกเปลี่ยนเรียนรู้ทางวัฒนธรรมในระดับนานาชาติ พยาบาลควรพัฒนาทักษะในการพยาบาลข้ามวัฒนธรรม และการสร้างสัมพันธภาพเพื่อตอบสนองความท้าทายของโลกในอนาคตที่มุ่งสู่การดูแลสุขภาพในสหวัฒนธรรม

J Nurs Sci. 2012;30(2):16-21

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Introduction

Cultural diversity is increasing in Australia and other Western societies. Past research¹ has found that people from culturally diverse backgrounds are vulnerable to poor health due to difficulties accessing culturally and linguistically appropriate health services. Cross-cultural learning of nurses is one way of promoting equitable health systems. Evidence indicates that study tour experiences, defined as study in another country, can facilitate nursing students' cross-cultural learning by providing firsthand experience of the complexities of culture and language²⁻³. However, to date few evaluations of cross-cultural learning and study tour programs have appraised cross-cultural learning for both guest nursing students and local nursing students in a host role.

Literature review

Although study tours have a long history, they are recent in nursing education driven by the increasing needs for international health perspectives and cross-cultural nursing among professional nurses⁴. Study tours have involved; community development⁵, undertaking clinical placements abroad⁶, and undertaking clinical care alongside local practitioners⁷. Host countries have included both resource rich and resource poor countries.

In an ethnographic study, Koskinen and Tossavainen^{6,8-9} explored Finnish and British nursing students' learning following a study tour program in the UK and Finland. They found the development of cultural competence, defined as acknowledgement of cultural differences and intolerance of discrimination, depended upon a process of maturation from ethnocentrism to ethnorelativism. Ethnocentrism refers to an understanding of one's own worldview as the central perspective for all people while ethnorelativism refers to an understanding that worldviews are cultural and they are relative to each other⁹. Tutors' support facilitated these students' exploration of their own cultural beliefs and values. Cross-cultural learning is described in another qualitative study by Ruddock and Turner¹⁰ using interviews with 7 Danish nursing students who took part in a study tour program in Jamaica, Malta, Greenland or Australia. They found that openness to diversity was an important factor in these students'

cross-cultural learning and understanding of socio-political factors influencing health. Greatrex-White^{4,11} further argued that openness to diversity is central to culturally competent nursing. Experiences of cultural diversity can challenge nursing students' self-perspective and promote their understanding of how culture influences identity and health. Researchers have noted that a person's attitudes of 'openness to' and acceptance of cultural diversity and cultural similarities may predict cultural competence in nursing¹². Other scholars have argued that study tours effectively promoted cross-cultural learning among nursing students¹³ and increased self-awareness and tolerance for difference over the long term¹⁴.

Although study tours in nursing are an intercultural experience between guest students, host universities and students, and health providers, much of the study tour literature appraises cross-cultural learning from the perspective of the guest students². This one sided perspective is a significant limitation in the literature as it de-emphasises the possible learning resulting from intercultural exchange. It remains largely unknown how cultural exchange between guest and local nursing students could influence learning.

Background

The School of Nursing and Midwifery, Deakin University (DU) is one of the largest nursing schools in Australia. DU offers a Bachelor of Nursing and post graduate nursing courses. All courses provided by DU are founded in evidence-based practice, experiential learning and problem solving approaches. DU has a strong commitment to nursing research in partnership with major hospitals and health care providers.

The Faculty of Nursing, Mahidol University (MU) was established in 1896. It is the oldest nursing school in Thailand. Ranked as the top Nursing School for research by the Thai Commission on Higher Education in 2005, MU is also highly regarded for excellence in nursing education at undergraduate and postgraduate levels. International collaboration is a priority of MU in both teaching and research. MU currently has over 24 partnerships with international universities.

In 2009, undergraduate nursing students from DU took part in a two week long study tour to Thailand hosted by MU. The learning objectives of the

study tour were as follows.

For Australian students

- To understand the health care system and community health nursing services in Thailand,
- To experience the community volunteer services in the primary care context in suburban Bangkok,
- To provide an opportunity for Australian students to meet and interact with Thai students,
- To provide Australian students with an experience of Thai culture and health care delivery for Thai people,
- To enhance cross-cultural learning and consider how this could apply to Australian Multi-cultural health settings.

For Thai students

- To provide an opportunity for Thai students to meet and interact with Australian students,
- To enhance cross-cultural learning and consider how this could apply to the Thai health and nursing contexts.

The study tour comprised various activities, including seminars by Thai nurses, academics and health practitioners; visits to Bureau of Health Policy and Planning (Ministry of Public Health), Traditional Thai Medicine, University based elderly club, Siriraj Hospital, Dumnuen Saduak Community Hospital, a community health post, and a private hospital. The tour also included other opportunities for experiential learning including time spent with a Thai nursing student in the role of a 'buddy'. Therefore, cross-cultural relationship building and exchange of cultural perspectives were core features of the study tour as Australian and Thai nursing students were encouraged and supported to interact and spend time together. Two members of staff from DU accompanied the Australian students and supported their learning during the study tour.

Stakeholders are integral to any project and include the end-users/clients, those planning the program and the people who will benefit from it. The key stakeholders for this study comprised diverse people including the Australian students, the Thai student 'buddies' and Thai academic staff involved in developing and monitoring the tour. Since we believe that stakeholders' involvement enhanced the chances of a successful tour and cross-cultural learning, it was

important to evaluate the tour from varying stakeholders' perspectives.

This evaluation study aimed to describe and evaluate cross-cultural learning and relationship building among Thai staff and host students from the Faculty of Nursing, Mahidol University (MU) and Australian guest students from the School of Nursing and Midwifery, Deakin University (DU), who participated in a study tour.

Methodology

A descriptive and exploratory evaluation design¹⁵ was employed to describe and evaluate cross-cultural learning and relating for guest and host nursing students, and host university staff.

Participants

The key stakeholders included the DU guest students, the MU student 'buddies' and MU staff involved in developing and monitoring the tour. Convenience sampling was used. During the final week of the study tour, the authors invited all key stakeholders to participate in the evaluation by sending an invitation and a copy of the Plain Language Statement using email. To be included, participants were required to volunteer to participate and speak at least conversational level English. Seven MU staff, five MU student buddies and 22 DU students agreed to participate in the evaluation.

Data Collection

Data collection included qualitative and quantitative approaches. MU staff participated in a semi-structured interview in English conducted by a member of staff from DU, who had prior training in conducting focus group interviews as part of post graduate training in Australia and had prior experience in undertaking focus group interviews, to elicit their feedback about learning. MU student buddies participated in a focus group conducted by the same member of staff from DU in English to provide individual and group feedback on key aspects of learning. A MU International Relations staff member was available during the focus group interview to translate if required. The semi-structured interview and focus group guidelines were developed in consultation with a panel of nurse academics/researchers with expertise in nursing education, cross cultural nursing and study tours.

DU students completed an anonymous online survey to elicit individual feedback on their satisfaction with the study tour. This survey included seven demographic items about age, gender, country of birth, international or domestic student status, whether the respondent spoke a second language, and years worked in the nursing industry. The nine questions capturing DU students' satisfaction with the study tour on a six point Likert scale (ranged from 1-6; strongly agree to strongly disagree) were developed by the evaluation team using the evaluation aim and learning objectives as a guide. These questions ascertained overall satisfaction, and satisfaction regarding learning about culture and culturally relevant nursing care, understanding of public health and health issues affecting resource poor countries, and learning about communicating with and relating to people from different countries. The survey also included the Miville-Guzman Universality-Diversity Scale short form (M-GUD-S)¹⁶ capturing openness to cultural diversity and similarities on a six point Likert scale (ranged from 1-6; strongly disagree to strongly agree). The M-GUD-S is a reliable and valid 15 item self-report scale¹⁶⁻¹⁷. It appraises awareness and acceptance of similarities and differences in others in three domains: 'Relativistic Appreciation of Self and Others' (cognitive), 'Searching for Diversity of Contact with Others' (behavioural), and a 'Sense of Comfort with Differences in Others' (affective)¹⁶⁻¹⁷. Additionally, 3 free response questions were included in the DU student survey asking respondents what they liked and disliked about the study tour and how the study tour could be improved.

Data Analysis

Fourth Generation Evaluation (FGE) was selected to support and guide the evaluation. In FGE¹⁸, all stakeholder groups are invited to articulate their concerns, claims and issues in order to ascertain their perspectives. We undertook data analysis using FGE as our evaluation methodology to understand how to improve the quality and meaning of the study tour for all three stakeholder groups in view of the identified learning objectives.

Qualitative data (semi-structured interviews, focus group, and free response questions in the online survey) were transcribed verbatim from audio-recordings and free responses on the survey. These

were thematically analysed by open coding of data units such as phrases or sentences or groups of sentences depending on relevant content in accordance with the evaluation aim¹⁵. Secondly, concepts were constructed from the codes and then grouped and ordered into themes. Analysis was circular as re-coding, re-conceptualisation and re-ordering resulted until consensus was achieved between the two researchers undertaking the analysis about optimal interpretation of these data. Both researchers used the evaluation aim and learning objectives to focus data analysis and for consistency.

The M-GUD-S was scored according to instructions provided by the authors by summing individual responses to each item on the three subscales. The 'Comfort with Differences' subscale was reversed scored prior to summation. Therefore higher scores reflect greater endorsement of each construct.

All quantitative data (on-line survey) were analysed and descriptive statistics including frequency, percentage, mean and standard deviation were used for the analysis.

Ethical Considerations

The study met all ethical requirements as specified by the National Health & Medical Research Council of Australia regarding research on human subjects. Approval for this study was sought and obtained from the Human Ethics Advisory Group Faculty of Health, Deakin University and the Mahidol University Institutional Review Board, Panel C Nursing.

Findings

Thai Staff: Seven semi-structured interviews were undertaken with Thai staff (five Registered Nurse academics, two International Relations staff). One staff member declined participation due to insufficient time. All seven participants were female aged between 25 and 51 years. The five nursing academics had completed a PhD/DSN, and the IR staffs were educationally prepared at masters and bachelor level.

Following analysis, the two identified themes were the role of the staff, and enhanced and valuable cross-cultural learning

- **Role of the staff:** All participants noted that their role was to coordinate and accompany the study tour acting as Thai culture consultants, guides and

translators when required. Staff participants discussed their role in providing and exchanging information with the Australian students regarding the Thai health system, nursing and the community health volunteer system.

'Some students they wanted to know some things and they ask about the tour on the bus and I have the chance to talk with some. And some have questions about the campus or the activities or the students.'

• **Enhanced and valuable cross-cultural learning:** Participants commented on enhanced cross-cultural learning regarding Australian culture and differences between the Thai and Australian health care systems. Participants discussed their learning about the Australian students' way of life and perspectives about health and nursing which enhanced their views about teaching and learning and different models of clinical learning in nursing.

'I've learnt about the students' view, about their culture, and about what they think. The students open their world and we also open our world. We all open our worlds and they share their experience.'

Participants considered that the study tour was valuable due to effective cross-cultural collaboration and relationship building between neighbouring universities and countries. They further considered the importance of cross-cultural approaches to education and research due to global issues facing health and nursing in the future.

Participants noted that Thai and Australian students' learned to build effective cross-cultural relationships and to accept belief and value differences. They thought that the study tour was valuable as it provided the Thai and Australian nursing students with an opportunity to learn how to work together and to learn about differences between nursing education and student experiences in these two countries.

'I think they understand Thai people better and this will be good for nursing care in the future. They appreciated ethnic groups even though not Thai but this can generate concepts about ethnic group or information. Understand and generally accept you know about cultural differences. They accept about beliefs, values of each culture.'

Thai Students: Five Thai students in their fourth and final year of the Bachelor of Nursing participated in the one hour focus group, including three females

and two males. All participants were aged between 20 and 21 years. Upon thematic analysis, two main themes emerged including the role of the MU student buddy and enhanced cross-cultural learning.

• **The role of the MU student buddy:** Participants described their buddy role as being a host to foreign nursing students. They prepared for the role by learning about the culture and language (generally English) of foreign guests. The role involved taking visitors out sightseeing during evenings and weekends. Student buddies also provided information about the culture, history and language.

'We give introduction, give information; we talk about how it was before. We talk about Thai food, about the temple and so a little information that we know'

• **Enhanced cross-cultural learning:** Thai students explained that they learned about Australian English, culture, beliefs and values. The Thai students discussed a number of situations with the Australian students that they found challenging, indicating their learning that social rules vary by culture. They commented that in Thailand people go out together; however, the Australian students on occasion went out alone. They found this particularly challenging as their role was to protect the Australian students. Several Thai students further commented that they observed some Australian students asking an older adult to move away so that they could take a photo. They noted that in Thailand younger people would not ask this of an older person due to respect for elders. Additionally, they reflected that in Thailand shoes worn outside the house are not worn inside; however the Australian students required reminding to remove their shoes prior to entering living areas. Importantly, Thai student participants learned that tolerance is very important in establishing and maintaining effective cross-cultural relationships.

'The main reason is when we move to another culture we know how it is. And then we know we can apply ourselves. It is important to make a relationship.'

Australian Students' Online Survey

Twenty-two of the 28 Australian students completed the survey (response rate of 78.6%) indicating good motivation to participate. There were no missing data. All respondents were female aged between 18-40 years. Seventeen (77.3%) were born in

Australia, one student was an international student, six spoke a language other than English and two spoke English as a second language. These small numbers precluded within groups comparisons.

All Australian respondents reported satisfaction with all aspects of the study tour. These data are presented in Table 1. Over 95% (n=21) strongly agreed/agreed that they were satisfied with the study

tour. Over 77% (n=17) indicated that they agreed/strongly agreed that their understanding of cross-cultural health/nursing care, and cross-cultural communication/relating had improved. The respondents reported over 72% (n=16) agreement/strong agreement that their understanding of public health, and health issues affecting resource poor and resource rich countries was improved.

Table 1 Frequency of responses on satisfaction survey (n=22)

Question	Response n (%)					
	Strongly agree	Agree	Mostly agree	Mostly disagree	Disagree	Strongly disagree
Overall, I am satisfied with the Thai study tour.	11 (50.0)	10 (45.5)	1 (4.5)	0 (0)	0 (0)	0 (0)
The Thai study tour has improved my understanding of culture.	12 (54.5)	7 (31.8)	3 (13.6)	0 (0)	0 (0)	0 (0)
The Thai study tour has improved my understanding of cross-cultural health care.	8 (36.4)	12 (54.5)	2 (9.1)	0 (0)	0 (0)	0 (0)
The Thai study tour will assist me to provide culturally relevant nursing care.	7 (31.8)	10 (45.5)	5 (22.7)	0 (0)	0 (0)	0 (0)
The Thai study tour has assisted me to improve my understanding of public health.	8 (36.4)	9 (40.9)	5 (22.7)	0 (0)	0 (0)	0 (0)
The Thai study tour has improved my understanding of health issues affecting resource poor countries.	9 (40.9)	7 (31.8)	6 (27.3)	0 (0)	0 (0)	0 (0)
The Thai study tour has improved my understanding of health issues affecting resource rich countries.	9 (40.9)	4 (18.2)	9 (40.9)	0 (0)	0 (0)	0 (0)
The Thai study tour has improved my ability to talk and communicate with people from different cultures.	5 (22.7)	12 (54.5)	5 (22.7)	0 (0)	0 (0)	0 (0)
The Thai study tour has improved my ability to relate to people from different cultures.	6 (27.3)	11 (50.0)	5 (22.7)	0 (0)	0 (0)	0 (0)

As presented in Table 2, students scored an average of 23.1 (SD 4.4) on the 'Seeking Diversity of Contact (Behavioural)' subscale. They scored a mean

of 24.7 (SD 3.9) and 26.2 (SD 3.0) on the 'Relativistic Appreciation (Cognitive)' and 'Comfort with Differences (Affective)' subscales, respectively.

Table 2 Frequency of responses M-GUD-S (n=22)

Question	Response n (%)					
	Strongly agree	Agree	Mostly agree	Mostly disagree	Disagree	Strongly disagree
Seeking diversity of contact (Behavioural)						
I would like to join an organisation that emphasises getting to know people from different countries.	9 (40.9)	6 (27.3)	5 (22.7)	1 (4.5)	1 (4.5)	0 (0)
I would like to go to dances that feature music from other countries.	6 (27.3)	7 (31.8)	7 (31.8)	1 (4.5)	1 (4.5)	0 (0)
I often listen to the music of other cultures.	0 (0)	8 (36.4)	8 (36.4)	2 (9.1)	4 (18.2)	0 (0)
I am interested in learning about the many cultures that have existed in this world.	11 (50.0)	7 (31.8)	3 (13.6)	1 (4.5)	0 (0)	0 (0)
I attend events where I might get to know people from different racial backgrounds.	5 (22.7)	4 (18.2)	7 (31.8)	4 (18.2)	2 (9.1)	0 (0)
Relativistic appreciation (Cognitive)						
Persons with disabilities can teach me things I could not learn elsewhere.	8 (36.4)	11 (50.0)	3 (13.6)	0 (0)	0 (0)	0 (0)
I can best understand someone after I get to know how he/she is both similar and different from me.	9 (40.9)	5 (22.7)	7 (31.8)	1 (4.5)	0 (0)	0 (0)
Knowing how a person differs from me greatly enhances our friendship.	8 (36.4)	4 (18.2)	5 (22.7)	4 (18.2)	1 (4.5)	0 (0)
In getting to know someone, I like knowing both how he/she differs from me and is similar to me.	6 (27.3)	9 (40.9)	6 (27.3)	1 (4.5)	0 (0)	0 (0)
Knowing about the different experiences of other people helps me understand my own problems better.	4 (18.2)	14 (63.6)	2 (9.1)	2 (9.1)	0 (0)	0 (0)
Comfort with differences (Affective)						
Getting to know someone of another race is generally an uncomfortable experience for me.	0 (0)	0 (0)	0 (0)	3 (13.6)	12 (54.5)	7 (31.8)
I am only at ease with people of my own race.	0 (0)	0 (0)	0 (0)	1 (4.5)	8 (36.4)	13 (59.1)
Its really hard for me to feel close to a person from another race.	0 (0)	0 (0)	1 (4.5)	2 (9.1)	6 (27.3)	13 (59.1)
It is very important that a friend agrees with me on most issues.	0 (0)	0 (0)	4 (18.2)	3 (13.6)	8 (36.4)	7 (31.8)
I often feel irritated by persons of a different race.	0 (0)	0 (0)	1 (4.5)	4 (18.2)	6 (27.3)	11 (50.0)

Analysis of the 20 text responses identified that students' valued the diverse experiences and cross-cultural learning experienced on the study tour. Respondents noted the value of interacting with the

Thai student buddies because this increased their understanding of Thai culture and cross-cultural relationships.

'Learning about the Thai culture and the public and private health system. It was a very rewarding experience that has changed my views on some issues in a very positive way.'

Additionally three Australian students participated in a small group interview. As only three students participated, these findings are briefly summarised to further illuminate text responses from the free response questions in the online survey. Participants considered that the study tour was a valuable learning experience, and they noted that communication is very challenging for foreigners. They discussed the importance of self-awareness and self-reflection in cross-cultural nursing practice, and re-appraised the value of health resources in resource rich countries like Australia.

Discussion

Evaluation findings suggest that study tours can benefit cross-cultural learning for all involved including guest and host nursing students. For example, the Thai staff discussed enhanced and valuable cross-cultural learning and re-appraisal of understandings of nursing education. Although participants focussed on differences between Thailand and Australia they considered that the capacity for relationship building is common to all peoples and essential to cross-cultural collaboration, and effective and empathic nursing care.

Thai students commented on their experience of enhanced and valuable cross-cultural learning including the challenges of different social behaviours and the importance of tolerance and acceptance. They discussed the importance of relationship building as essential to cross-cultural nursing and collaboration. Our findings suggest that Australian students also considered that the study tour had contributed to their developing cultural competence and understanding of public health in a global world.

Findings from the M-GUD-S describe 'openness to cultural diversity and similarities' among the Australian students. In comparison to recent M-GUD-S data among Australian nursing students¹², respondents' average score on each subscale indicates that they were very open to cultural diversity and similarity. Moreover, their responses to M-GUD-S questions within each subscale indicated high

agreement (70% – at least 90%) that they seek diversity of contact, appreciate differences between people, and are comfortable with differences. Past study tour literature has found that openness to cultural diversity and similarities indicates developing cultural competence among nurses.^{4,6,8-9,10,14}

Similar to their Thai student counterparts, Australian students considered the challenges of tolerating and adapting to different social rules and customs. In the literature^{6,8} developmental processes of adaptation from ethnocentrism (one's own world view is central to everyone's reality) to ethnorelativism (cultures and behaviours are only understandable within the relevant cultural context) are core dimensions of cultural competence. Focus group findings suggest that Australian and Thai students' discomfort arose due to changes in self-understanding emerging within their intercultural relationships with each other. This finding and students' growing awareness of the need for acceptance and tolerance of differences in others indicates that Australian and Thai students were developing cultural sensitivity and skills in cross-cultural relating.

There are a number of limitations to the current evaluation. It cannot be claimed that the study tour caused cross-cultural learning as other factors, such as personality, could explain findings. This was only a small evaluation which did not test learning in depth. Findings cannot be claimed to represent the views of those who did not participate. Interviews were not conducted with an interpreter and this may have restricted some participants' responses although Thai participants spoke at least conversational level English. Despite these limitations, however, the findings present an example of an evaluated study tour emphasizing cross-cultural relationship building that may be of interest to others aiming to develop and evaluate similar study tours elsewhere.

Conclusions

This study has implications for nursing education regarding cross-cultural nursing and for a globalising approach to nursing practice. The finding of enhanced cross-cultural learning for all three stakeholder groups emphasises the importance of intercultural exchange in programs of this nature. Guest and host nursing students, and staff experienced intercultural

relationship building during the study tour. Ability to build relationships with others from culturally diverse backgrounds is central to cross-cultural nursing. Importantly, this is challenging to simulate in the classroom necessitating experiential approaches to learning such as study tour opportunities. There has been limited focus on this learning potential in previous research.

The findings indicate that nursing education providers should include opportunities for intercultural exchange in study tour programs, in either a host or guest capacity, to enhance cross-cultural learning with a focus on multiple stakeholders to support nurses' ability to develop intercultural relationships. Nurses require excellent skills in cross-cultural nursing and relating to lead socially just health systems and meet the future global challenges to health care over the next millennium

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