

# Understanding transcultural nursing

Transcultural nursing is the very foundation of the nursing profession, Akram Omeri (pictured) believes, but too often it's overlooked or misunderstood in this country. LOUISE YOUNG talks to *Nursing Review's* transcultural nursing columnist

It was her 14 years of community nursing practice that sparked Akram Omeri's passion for transcultural nursing (TCN). From 1976 to 1990 Omeri led a multidisciplinary health care team in the Central Sydney Area Health Service, working with a strongly multicultural community.

"During this time I came to realise that nurses as frontline practitioners were often put in bi-cultural situations without having any formal preparation in transcultural nursing," Omeri told *Nursing Review*.

"All team members were involved in caring for people from different cultural backgrounds with culturally diverse practices."

This included the health care interpreters (in Yugoslav languages, Cambodian and Vietnamese languages) who were "expected to tell us everything about the cultures they interpreted for, as well as translating".

Omeri believes the years at the health service formed her "lived experience, as an immigrant nurse".

"They also brought a wealth of experience in observing TCN concepts in practice," she said.

It was also a period where she witnessed evolutionary changes in multicultural policies from "assimilation" to "multiculturalism" to ideologies of "inclusiveness" in the late 1990s. While Omeri believes these policies had significant implications for nursing and health care in Australia, she also is firm about transcultural nursing requiring more than just tolerance.

"Once you are tolerant and cognitive of those differences then you can seek to learn more of those people in a more academic structure," she said.

"Transcultural nursing is an established discipline of study, research and practice. It's a humanising force founded on evidenced-based knowledge - that's what's been missing from nursing."

Prior to migrating to Australia from Iran in 1971, Omeri completed her nursing studies at the American University of Beirut, Lebanon, and then studied midwifery in the UK. She also completed a master of nursing at the University of Washington, Seattle.

From 1968 to 1971 she worked as nursing education consultant with the department of health in Teheran.

"I taught a number of subjects and undertook the clinical supervision of students," Omeri said. "I also contributed to the development of policy guidelines for establishing schools of nursing and to a national nursing examination and accreditation in Iran."

Prior to her role with the CSAHS, Omeri taught maternal child health nursing and other subjects at the Prince Henry Hospital school of nursing.

In 1990, with the vision of establishing transcultural nursing education in Australia, she joined the nursing school at the Cumberland College of Health Science. "I wanted to make a difference in the nursing profession, and was familiar with the pioneering work of Madeleine Leininger," she

said. "Working in community health, I'd witnessed first hand marginalisation of immigrants, their loneliness and isolation. How people viewed them, their cultural ignorance and lack of cultural understanding."

"The strength of people's cultural connection with their roots was not fully understood."

In 1991 she put her first course proposal in transcultural nursing forward at Cumberland. It was approved without question, although the term "transcultural" was replaced by "multicultural".

"I think it was purely cultural ignorance, people said they'd never heard of the term," she said.

Omeri praised Cumberland, however, for being supportive and providing nurturing leadership - adding that the move to a nursing faculty at the University of Sydney's main campus has left it geographically and academically isolated.

"The Cumberland school of nursing had a lot of international involvement, many faculty had studied and had clinical experience in countries overseas. They were more aware and more in touch," she said.

"In order to be creative one needs the nurturing environment, and Cumberland was in the faculty of health sciences - with 11 other disciplines working with us including speech pathology, physiotherapy and behavioural sciences."

While not then a nursing faculty, having grown out of the regional nursing colleges, Omeri described the school as "a centre of excellence" with strong international links. There were international students, a joint project in Singapore and Omeri's own collaborative works with the US, UK, and Saudi Arabia.

"We were a group of nursing experts in that school - we had people doing international and collaborative work with WHO, we also had a very strong orientation toward community program. Many leaders in community nursing went through that course."

Shortly after joining Cumberland, Omeri wrote to Professor Madeleine Leininger to ask for guidance in establishing transcultural nursing in Australia.

"From this point on the 'wheels began to roll'," she said. "I was the first person in Australia to receive mentorship from her - at my own expense, I went to the US, and for another study visit in 1994." Through letters and faxes, Omeri has continued to receive mentorship from Leininger over the past 14 years.

She began TCN studies at Wayne State University in 1992, and completed a PhD (*Transcultural nursing care values, beliefs and practices of Iranian immigrants in NSW Australia*) in 1996. Omeri joined the TCN Society (Global) in 1992 and, following certification, became the first and remains the only certified (CTN) TCN nurse in Australia. She was also invited to join the editorial board of the *Transcultural Nursing Journal*.

In 1994, with the support of the Royal College of Nursing, Australia (RCNA) she established an

Australian Transcultural Nursing Society.

"The society aimed to promote TCN in Australia, and initiate collaboration with Transcultural Nursing Society Global," she said. "Two international conferences in 1997 and 2000 resulted, both initiated by me with support from the RCNA."

Omeri also wrote the first book on TCN in Australia, again with support from the RCNA, and has published numerous journal articles on the subject. In recognition of this work Omeri was the first nurse from outside North America to be awarded the prestigious Leininger award, in 1998.

Omeri's latest research - "Beyond Asylum" (which she will share with *Nursing Review* next month) looks at Afghan refugees in NSW.

"I had been writing submissions for a grant for that since 1998," she said. "I wanted to focus on an emerging immigrant groups from the Middle East. Often people lump the whole Middle East together, so I was hoping to look at Armenians, Assyrians, Kurds, Iranians and Afghans."

"It became a massive project, when I eventually got the grant from WSAHS-TMHC it was a choice between Iranians and Afghans. Since my doctoral study focused on my own culture (Iranian), I decided to focus on the Afghans - especially with all the controversial issues faced by refugees."

Omeri used focus groups and individual interviews to conduct research, and received "tremendous support" from the Afghan community. Thirty-eight people, including doctors, nurses, interpreters, shop-keepers, teachers, housewives, were interviewed. Omeri's understanding of Dari, the language spoken predominantly by the Afghan community in NSW, was also a benefit.

"The focus of the study was their resettlement experience, as well as the experiences they had had prior, that's why it's called 'Beyond Asylum'."

Shortly after getting in touch with Leininger in the early 1990s, Omeri designed and began to teach a graduate course in TCN - an elective in the master of nursing program. "In 2001, this course was restructured to flexible learning mode, which has made it attractive to interstate graduate nurses who are unable to undertake full time, on-site studies," she said.

"The course has attracted interest from nurses in the US, Saudi Arabia, Holland, Switzerland, New Zealand as well as Australia. In the short time it has been offered, over 100 inquiries have been received."

Omeri, however, recently left her position at the University of Sydney nursing faculty as she "could not see opportunities to pursue and strengthen transcultural nursing".

"Although the course received lots of enquiries, often there was little support to promote the unit of study," she said.

"Twenty three graduate students completed the unit in 2001 with extremely positive comments. Also, due to my international reputation and publications, I attracted quite a few international stu-



dents. "Transcultural nursing has been and remains my passion and nothing or no one can stop me from pursuing my aims."

She firmly believes TCN should be an integral part of undergraduate and postgraduate nursing curriculum.

"How else could students be prepared to provide meaningful, competent, safe and culturally congruent care, in harmony with the lifeway practices of culturally and linguistically diverse people we serve?" she said.

"The roots of all of this is to prepare faculty in transcultural nursing to enable them to educate and mentor students. For this there is need for nurturing, supporting and motivating leadership who themselves are believers of the discipline of TCN."

Some of the negativity towards promoting TCN, and her own successful work in the field, boils down partly to "tall poppy" syndrome and academic jealousy, Omeri believes. She also pointed out that most leadership positions in academia and health services are occupied by members of the "dominant culture".

"Overseas nurse graduates, especially those from non-English speaking backgrounds, are increasingly marginalised, stereotyped and discriminated against regardless of their educational preparation and expertise. This issues needs to be addressed by Australian nursing credentialing organisations and leaders."

Her passion, however, "is stronger, in spite of some negative experiences that have happened."

Omeri also remains firm about what makes a transcultural nurse.

"I don't think it's enough to say 'let's celebrate diversity', I think celebration needs a body of knowledge," she said. "In nursing we need a body of knowledge that can be applied to clinical practice."

"Being someone from a different culture doesn't make one a transcultural nurse. TCN is a discipline you have to study, practice and research. "It is through studies in TCN that nurses can acquire the culture care knowledge that it needs to build tolerance and understanding of the other in meaningful ways."

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