

Sigma's 30th International Nursing Research Congress

A Structural Equation Model of Cultural Competence and Cultural Care Behavior of Thai Nurses

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Purpose:

This research were to examine the causal model and to find out important causal variables that could affect cultural competence and cultural care behavior of professional nurses who are working at international hospitals in Bangkok, Thailand

Methods: The sample was 451nurses working in 4 international private hospitals in Bangkok who have experience at least 1 year. Participants derived from stratified random sampling technique. The data was collected by a set of questionnaires with 5 Instruments 6-point rating scales, with the confidence level between .67 - to .94. The data were analyzed with SPSS statistical software with LISREL.

Results: The results showed that the assumption of causal relationship model fit with empirical data, $c^2 = 499.34$, $df = 149$, $p\text{-value} = 0.00000$, $SRMR = 0.078$, $RMSEA = 0.072$, $GFI = 0.97$, $NFI = 0.96$, $TLI = 0.96$, $CFI=0.97$, $PNFI = 0.75$, $c^2/df = 3.35$. Cross-cultural experience and cultural attitude have direct effect to cultural competence, coefficient of 0.22, 0.88 respective. The variables that had indirect effect to cultural care behavior coefficients of 0.14, 0.55, perceived, perceived organization support and cultural competence have direct effect to cultural care behavior coefficient of 0.11, 0.63, the result found that the overall fitness indices of the hypothetical model were a good fit. The causal variables which have direct and indirect effect to cultural competence and cultural care behavior. The causal model fit with empirical data.

Conclusion: Cultural care behavior can be developed by enhance cultural competence and perceived organization support. Nurses' cultural competence can be developed by offering diversity cultural training so increasing cross- cultural experience and cultural attitude. A significant implication of the finding is that this research could contribute to the development of a program to enhance cultural competence of cultural care behavior of nurses. Subsequently, Nurse who take care of patient who different cultural background so need to have cultural competence for reduce bias, prejudice, and stereotype. The quality of nursing care for foreign patients' will be ultimately improved so patient satisfaction and good quality outcome.

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Keywords:

Structural Equation Model, cultural care behavior and cultural competence

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Abstract Summary:

A Structural Equation Model of Cultural Competence and Cultural Care Behavior of Thai Nurses. The research were to examine the causal modeland to find out important causal variables that could affect cultural competence and cultural care behavior of professional nurses who are working at international hospitals in Bangkok.

Content Outline:

1. Cultural care behavior
2. Cultural competence and affect cultural care behavior
3. Conceptual framework using social cognitive theory
4. Causal factors affecting cultural performance and behavior.
 - Cross- cultural experience affect cultural competence and cultural care behavior
 - Cultural attitude affect cultural competence and cultural care behavior
 - Perceived organization support affect cultural competence and cultural care behavior

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