# Culturally Competent and Community Based Mental Health Care for the Older Women in China

# Yifan Zhu

Department of Health and Environmental Science

Yifan.Zhu14@student.xjtlu.edu.cn

**Keywords:** Community psychological counseling for elderly women, Psychology of older women, Community care, Cultural competence, Influencing factors, Humanistic care, Review.

**Abstract:** This paper first explains the necessity of community psychological nursing for elderly women and summarizes the analysis of researches on elderly women of community psychological ones in recent years in China, then introduces the concept of cultural competence and analyzes the factors influencing the cultural competence of psychological counseling of elderly women in communities of China. Finally, it is pointed out that the psychological counseling workers of the elderly women in the community learn to respect the cultural differences of patients in different groups, and in the future community work can better provide humanistic care services for patients with different cultural backgrounds.

# **1. Introduction**

With the rapid development of social economy, the living standards are improving day by day, the level of medical care is improving day by day, people's health awareness is also increasing day by day, and the life expectancy is lengthening, as well as the aged population is increasing year by year, which is an inevitable trend of social development in China. In this regard, community health workers should not only be satisfied with longevity, but should pursue healthy longevity. However, to achieve this goal, we must develop and improve community medical care and nursing as soon as possible, constantly disseminate the knowledge of preventive health care to the population, change their bad living habits, and effectively adjust the psychological imbalance, so as to realize the goal of health and longevity.

On the other hand, with the deepening of degree of population aging, women would make up an increasing proportion of the elderly population, pension problems especially the elderly pension problems will be more and more concentrated pension problem for women, it will be the international community needs to confront problems.

# 2. Necessity of psychological nursing of community for elderly women in China

#### 2.1 Psychological characteristics and changes of elderly women in communities of China

With the increase of age, there are a series of symptoms and signs of ovarian dysfunction before and after menopause. Due to decreased ovarian function and decreased estrogen level, the feedback effect on hypothalamic-pituitary lost [1]. At the same time, due to the atrophy of memory cells and the decline in perception and memory, the elderly women in the community are easy to forget things, lack of understanding and judgment and slow in action also delayed in response, as well as lack of enthusiasm and initiative.

#### 2.2 Changes in the mental health of elderly women in communities of China

During menopause, a series of symptoms such as vegetative nervous system disorder, nervous tension excitable, depression, restlessness, dreaminess and headache occured in elderly women in communities [2]. At the same time, the elderly women in the communities are a bit hard to receive

information because of their physiological hearing or vision defects. Physical and cognitive changes, or social environmental changes can affect the communication between elderly women and communities caregivers in the communities.

Through the analysis of the community researches of psychology of elderly women in China in recent years, it is found that, firstly, the researchers have been paid more and more attention, which show that the number of papers has gradually increased, but the overall research level is relatively low, and few papers have been published in mainstream psychology journals [20]. Secondly, the research object of community psychology of elderly women is narrow, mainly in special ages with physiological diseases. The research object has a larger age span and less research on elderly people [21]. Thirdly, the research method of community psychology of elderly women is relatively single, mainly using the empirical research method of clinical research and questionnaire survey, lacking comprehensive research means [22]. Fourthly, the community psychological research team of elderly women mainly comes from the medical and health system personnel, and the research force of psychological researches for elderly such as institutions of higher learning and research institutes is relatively weak[23]. Fifthly, the research on the community psychology of elderly women focuses on basic research, mainly focusing on the general characteristics of psychology of the elderly, the psychological care and health care of the elderly [24]. Although some achievements have been made in the research on community psychology of elderly women, there are still many defects and inadequacies. More efforts of geriatric psychologists are needed to jointly promote the development of community psychology of elderly women [25].

With the acceleration of global integration process and the increase of international communication opportunities, community medical staff will face more and more patients with different cultural backgrounds and inevitably conduct intercultural communication with these patients in China. The following is a summary of the relevant concepts, influencing factors, approaches and strategies of cultural competence cultivation, to provide reference and help for the community to improve psychological counseling in China based on cultural competence.

#### **3.** Definition of cultural competence

The concept of cultural competence comes from the work of Leininger's multicultural nursing education [3], also known as intercultural efficiency and cultural sensitivity [4]. Its definition has been interpreted by different scholars from different perspectives and has not been unified yet [5], but it is generally believed that it is the attitude knowledge and skills that nurses need to provide excellent care for patients with different cultural backgrounds [6]. Cross believes that cultural competence refers to a series of behaviors, attitudes and strategies that enable each system, department and career to work effectively in a multicultural environment [7]. Campinha-bacote considered that culturally competent was the process of nurses' continuous efforts to work effectively with patients, their families and communities in different cultural backgrounds, including cultural desire, cultural awareness, cultural knowledge, cultural skills and cultural interaction.

# **4.** Factors influencing the culturally competent of psychological counseling of elderly women in communities of China

#### **4.1 Demographic factors**

# 4.1.1 Degree

Tian Bei [10] showed that the qualified rate of multicultural nursing cognition of the elderly women's psychological auxiliary was positively correlated with educational background in communities of China. Chen Ying's [11] research showed that the more educated the community worker, the easier to understand and master multicultural nursing knowledge.

#### 4.1.2 Clinical practice

Qian Jialu[9] showed that the total score of the community's psychological helper for elderly women in communities of China who have completed clinical practice or internship was higher than that of those who have not. It may be because the mentee community psychology in the process of practice, when evaluating the health of the patient, it would first evaluate the culture. Once there was the conscious presence of cultural prejudices and assumptions, it would actively understand the patients' cultural background, continuously enhance their cultural sensitivity to provide the patient with its cultural background consistent care.

#### 4.1.3 Learning time

Research by Tian Bei [10] showed that there was a positive correlation between the qualified rate of the multicultural nursing cognition of the elderly women in communities's psychological auxiliary and the learning time. With the continuous accumulation of learning time, the community psychological facilitator can constantly internalize the multicultural nursing knowledge and improve the cognition of multicultural nursing.

#### 4.2 Cultural contact

Qian Jialu [9] showed that the total score of the multiculturally competent of the elderly women's psychological auxiliary in the community who had been exposed to foreign cultures through various ways was higher. Repo[12] found that the more opportunities to communicate with people of different cultures, the higher the culturally competent of the community's elderly women's psychological auxiliary.

# 4.3 Multicultural care education

A number of scholars have shown that the community psychological facilitators who participate in too many meta-cultural training can combine theory with clinical practice and have a higher understanding of multicultural nursing [8-10]. Helen [13] used CCA to survey 46 mental-health counselors for elderly women in communities who had not participated in meta-cultural training and 53 mental-health counselors who had participated in training. It was found that after the course of multi-culture nursing, the cultural awareness and cultural sensitivity of the mentee were significantly higher than those who had not participated, and they could better understand the culturally competent. And Felder[14] found that after education of cultural diversity, community psychological counselors score low on the cultural knowledge and cultural attitude of African American patients, and it is necessary to further add cultural content and improve teaching methods in community care education to ensure that they have better culturally competent.

### 4.4 Language communication

# 4.4.1 Professional English

The study of Qian Jialu [9] showed that the English course of psychological nursing specialty helped the elderly women in communities's psychological auxiliary to understand the differences between Chinese and western nursing culture, nursing philosophy and nursing work, learn relevant knowledge of intercultural nursing, and strengthen self-confidence [15-17].

#### 4.4.2 Communication skills

Tian Bei [10] showed that the qualified rate of multicultural nursing cognition of the elderly women in communities's psychological auxiliary was positively correlated with their communication ability. Through effective nurse-patient communication, it can promote them to understand the cultural background of patients and avoid cultural conflicts.

## 5. Approaches and strategies for cultivation

# 5.1 Reasonably set humanistic courses for community elderly women's psychological guidance counselors

The proportion of social science humanities courses of community nursing major in China only accounts for about 8% of the total class time, which is much lower than the proportion of 15% ~ 25% in the United States and Germany [18]. Therefore, nursing colleges should increase the proportion of school humanities courses, to form a new curriculum system, including basic [19], crossed and borderline course, in addition to basic courses in nursing etiquette, interpersonal communication, also can increase the international nursing overview of humanistic quality, multicultural and nursing, sociology, ethnology, folklore, history of religion, laws and regulations, eastern and western cultures such as the humanities. In addition, intercultural nursing concept can be integrated into the core courses of community nursing, and intercultural nursing can be infiltrated into every link of psychological nursing education in communities.

#### 5.2 Regular special lectures and workshops in communities of China

The community can jointly invite famous intercultural nursing experts at home and abroad to carry out multi-cultural and psychological nursing lectures in the communities, and guide the community workers to realize the importance of culturally competent in the work of quality nursing services through the excellent speech of the experts, combined with a large number of cases, made them realize the charm of community psychological counselors with high-level culturally competent.

#### 5.3 Establish an effective cultural capacity evaluation system in communities of China

Multi-cultural nursing education is an inevitable trend of development of psychological nursing education in communities in China, and it is particularly important to establish an effective culturally competent evaluation system. Therefore, community health care should include multicultural and nursing content in the assessment standards of theory and operation skills, increase the proportion of multicultural and psychological nursing assessment, and cultivate the culturally competent of community workers in China.

#### 6. Summary

It is hoped that in the near future, community workers in China can establish a harmonious relationship with the elderly in the communities with their personality charm, and communicate with them with human and non-verbal information, then implement healthy education, also greatly improve the self-care awareness of the crowd and follow medical behavior, as well as fully mobilize their enthusiasm and give full play to their initiative, so that they can effectively adjust the unbalanced mentality, and correct bad living habits and behaviors, then improve and promote health, and at the same time make the connotation and extension of nursing truly permeate into the families.

#### References

[1] Xu Xiaodong, Tang Qijin. On the effect of exercise prescription on the health of elderly women [J]. Sports world (academic edition), 2008, (1): 9-10

[2] Huang Li. Attention to elderly women - an analysis of Anhui province [J]. Journal of Anhui University Social science edition, 2007, (4): 94.

[3] Amelie BG, Jacinthe P. Cultural competence: a constructivist definition [J]. Journal of Transcultural Nursing, 2015, 26 (1): 9 -15.

[4] Peng Youqing. Development and enlightenment of the assessment tool for nurses' cultural competence [J]. Journal of now the generation of China nursing, 2015,29 (2): 3473-3478

[5] Collette L, Vicki H, Marietta B, et al. Measures of cultural competence in nurse: an integrative review [J]. The Scientific World J, 2013 (4): 1-10.

[6] California Endowmen. Principles and recommended standards for Cultural competence education of health care professionals EB/OL]. 2017-03-20]. http://www.calendow. Org/uploadedFiles /principles standards cultural competence. pdf.

[7] Shaya FT. Gbarayor CM. Specical articles: the case for cultural competence in health professions education [J]. Am J Pharm Edue, 2006, 0 (6): 124.

[8] Zhang Xiaoli, Peng Youqing, Wu Hongyu. The current situation of Shanghai high vocational students' cultural ability investigation and analysis of influencing factors [J]. Nursing studies, 2015, 9 (10B): 3503-3507.

[9] Qian Jialu, Zhang Lu. The current situation and influence of the multicultural ability of 315 undergraduate nursing students factor analysis [J]. Nursing Journal, 2007, 24 (5): 37-40.

[10] Tian Bei, Tian Danghong. Multi-culture nursing cognition of nursing interns and its influencing factors investigation [J]. Hunan medicine, 2014,25 (9): 1378-1380

[11] Chen Ying. Construction and practice of multicultural nursing teaching model [D]. Nanning: guangxi medical department University, 2015.

[12] Repo H, Vahlberg T, Salminen L, et al. The cultural competence of graduating nursing students [J]. Journal of Transcultural Nursing, 2016, 8 (1: 98.

[13] Helen Reyes, Lance Hadley, Deborah Davenport. A comparative analysis of cultural competence in beginning and graduating nursing students [J]. ISRN Nurs, 2013 (2): 929764.

[14] Felder E. Baccalaureate and associate degree student nurses' cul tural knowledge of and attitudes toward black American clients. [J] J Nurs Educ, 1990, 29 (6): 276-282.

[15] Wang Jingjing. Design and implementation of specialized English teaching for undergraduate nursing students [J]. Nursing research, 25 (1B): 162-163.

[16] Gao Lei, Hu Bo, Shi Chen. Study on intercultural education in English teaching of nursing specialty study [J]. Nursing studies, 2012, 26 (5B): 1340-1342.

[17] Hou Xiaoni, Hao Yufang, Chen Yan. Teaching practice and research of English course in nursing specialty in China--the status quo [J]. PLA nursing journal, 2014, 31 (12): 39-41.

[18] Ma Fang, Song Jianhua. Care for education and challenges to care for education [J]. Chinese care education, 2008, 5 (1): 45-47.

[19] Wang Yonghong, Hu Yan, Ma Hongli. The primary care needs of patients undergoing major surgery-Investigation of the ability to seek and care [J]. Journal of nursing education, 2012, 27 (4): 305-307.

[20] Li Xu, Chen Tianyong. Review of the research on the daily cognition of the elderly [J]. Advances in psychological science, 2011, (11): 1658-1666.

[21] Wu Zhenyun. Geriatric psychology in China in the 21st century [J]. Chinese journal of gerontology, 1999, (6): 371-372.

[22] Wu Yueqiong, Wu Yanqiong. An overview of research on cognitive psychology of aging in China [J]. Journal of Guizhou normal university, 2011, (4): 66-69.

[23] Yu Yibing, Ge Minggui. Econometric analysis of Chinese developmental psychology studies at the turn of the century [J]. Psychological development with BBB 0, 2004, (4): 79-83.

[24] Fang Shuanghu, Tu Tao. Literature metrological analysis of positive psychology studies in China [J]. China special education, 2010, (7): 82-86.

[25] Cui Gong. Attention to the mental health of the elderly [J]. Chinese journal of health medicine, 2011, (6): 437-439.

[26] Lou Xinsheng. On the choice of teacher's role in the multicultural perspective [J]. Teaching, learning and management, 2013, 20 (1): 49-51.

[27] Campinha-Bacote J.A Model and instrument for addressing cultural competence in health care [J]. Nurs Educ, 1999, 38 (5): 203-207.

[28] Ma Lili, Jiang Hui, Peng Youqing. Investigation and analysis on the current situation of the cultural ability of registered nurses in pudong new district [J]. Chinese journal of modern nursing, 2015 (34): 4102-4107.

[29] Jeffrys MR. Teaching cultural competence in nursing and health care: inquiry, action, and innovation [M]. 3rd edition. New York: Springer, 2015:250-289.

[30] Rew L, Becker H, Cookston J, et al. Measuring cultural awareness in nursing students [J]. Journal of Nursing Education, 2003, 42 (6): 249-257.

[31] Ge Yunyun. Research on cultural competence and cultural sensitivity of nursing students [D]. On the sea: Second Military Medical University, 2006.

[32] Xu Ershan, Wang Rong, Su Yinhua. Assessment of multicultural nursing ability of undergraduate nursing students - Preliminary development of the scale [J]. Journal of nursing, 2015, 30 (22): 70-73.

[33] Du Dandan, Chen Jingli, Huang Wanqi. The demand of humanistic knowledge and cultural ability of nursing undergraduates [J]. Journal of nursing, 2007, 22 (12): 59-60.

[34] Yu Haiping, Liang Liu, Cheng Min. The cultural ability of nursing students in two vocational colleges in Shanghai [J]. Chinese journal of modern nursing, 2015, 21 (29): 3485-3488.

[35] Campinha-bacote J.A Model of practice to address cultural com - Petence in rehabilitation nursing [J]. Rehabilitation Nursing, 2001, 26 (1): 8-11.

[36] Ma Weiguang, Li Jiping. Trend of nursing development — multicultural nursing [J]. Journal of Nursing Education, 2005, 20 (3): 244-245.

[37] Marshall J. International and crosscultural issues: six key changes for our professions [J]. Folia Phoniatr Logop, 2003, 55 (6): 329-336.

[38] Lu Feng, Luo Jie, Liu Runbing. On psychological care of the aged [J]. Chinese and foreign medical treatment, 2009(35): 133

[39] Yao Jingpeng Geriatric nursing [M]. Beijing: Beijing medical university press, 2002: 15-21

[40] Zhang Hongjing, Ma Yingzhu (correlation between psychological status and family function of elderly university students [J]. Chinese journal of mental health, 2002; 16 (3): 172-4

[41] Zhao Youwen, psychological health and mental health care of the elderly [J]. Practical geriatrics, 2003; 17 (2): 60-2 [6]