

From the Special Issue Editors

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International community-based health care is important for integrating the concept of globalization into nursing education. Through international collaboration, nurses can connect with people with the common goal of understanding global health issues, examining different health care systems, and improving health for all, regardless of color, culture, language spoken, age, or socioeconomic status. With international collaboration and clinical experiences, nurse educators can establish relationships to develop global research projects and enhance nursing students' cultural competence. In this special issue, we address community-based care programs and research both in the United States and in international locales. The issue also explores health problems among minority populations.

We begin with two articles addressing community-based care from diverse international care perspectives and at diverse care delivery sites. The authors contribute to our understanding of global issues in health and community care by examining preventive practices and satisfaction with home care. In the first article, Ivanov and her colleagues compare preventive health care practices of the immigrant women from the former Soviet Union in Germany and in the United States. Their article is of particular interest because differences in women's use of mammography and Pap smears might be explained by the different health care systems and the priority of preventive care perceived by immigrant women in the two countries. In their article, Tung and colleagues used the framework of client satisfaction to examine factors influencing family caregivers' satisfaction with home care services for mental illness in Taiwan. They note that caregivers' age, marital status, support from family members, and the amount of time spent in caregiving contribute to satisfaction. They suggest that this framework provides a model that can be implemented in home care nursing practice in Taiwan, although home care services in Taiwan are still relatively new and research on home care services is lacking.

With increasing changes in the demographic characteristics of the U.S. population, learning to provide culturally competent care to patients has become an important component of nursing education. International community health nursing clinical experiences can change students' worldviews and help them develop culturally competent skills and better understanding of global health issues. In this special issue, two articles describe international community health clinical experiences in Russia and China. Jones, Ivanov, Wallace, and VonCannon describe how metabolic syndrome screening activities for community residents in Kuzmolovsky, Russia, enhanced culturally sensitive care for nursing students. They conclude that the international clinical experience and service learning program increases students' self-confidence and provides insight into culturally sensitive care for diverse populations in the United States. Hu, Andreatta, Yu, and Li describe an international clinical and cultural experience in collaboration with Wuhan University, HOPE School of Nursing, China. Working with Chinese nursing students in conducting community assessments, home visits, health fairs, and an educational project and visiting Western and traditional Chinese medicine hospitals, nursing students learned about Chinese culture and the differences in health care systems, lifestyles, and the prevalence of diseases between the United States and China as well as how to appreciate and respect a culture that is different from their own. The experience has enhanced their skills in providing culturally competent care to diverse populations in the United States.

Despite efforts to eliminate health disparities, racial and ethnic minorities such as African Americans and Hispanics/Latinos continue to have higher rates of morbidity and mortality from chronic diseases than Whites. Ding and Crawley's article explored the prevalence of substance use among African American teenagers and their mental health, using data from the 2007 National Survey on Drug Use and Health. They found a low level of drug prevalence among African American youth. However, African American youth who used different drugs had a high risk of overnight hospital stay for mental problems. Their study indicates that family structure, parental role, and religiosity are important factors in drug use in this population. Finally, Amirehsani examines multiple factors that contribute to the health disparities of Mexican Americans with type 2 diabetes and evaluate intervention programs for this population. The author recommends strategies to improve health outcomes for Mexican Americans with type 2 diabetes, including providing culturally and linguistically appropriate educational programs for diabetes, incorporating cultural values into diabetes programs, increasing the cultural competence of nurses and other health care providers, and establishing community partnerships to address the multiple barriers that this population experiences.

In summary, as the world shares common health problems and searches for common strategies to improve health for all, globalization and culturally competent care are of great importance in nursing education and practice. In nursing education, content on globalization needs to be included within undergraduate and graduate course work to provide students with a broad understanding of how infectious, environmental, social, and political conditions in one country can affect conditions in the country that they live and work, including the care they provide their

patients. With the increase in worldwide travel and migration of refugees and immigrants, new social conditions and diseases are appearing. Environmental disasters in one part of the world affect various countries and their populations. The same is true for political unrest in countries. Nurse educators and practicing nurses today must be abreast of the positive and negative effects of globalization to provide culturally appropriate care to the populations they serve.

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