Original Article

Filipino Nurses' Attitudes and Cultural Competency in Caring for Mentally-Ill Patients: A Scoping Review

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Abstract

Background: Although an abundance of literature exists regarding the attitudes and cultural competency of nurses toward people with mental illness, there is scarcity in the literature on these concepts in relation to Filipino nurses. Thus, this review aims to determine the attitudes and cultural competency of Filipino nurses caring for patients with mental illness.

Methods: This scoping review was guided by Arksey and O'Malley's framework. Electronic databases of ProQuest and Ebscohost and the gray literatures were searched from July to August 2018 including the reference lists of eligible articles.

Results: Fourteen articles met the inclusion criteria. The information and evidences on Filipino nurses' attitudes (n=11) towards patients with mental illness were limited; mostly extrapolations from the empirical studies and gray literatures on Filipino nurses in other countries and alongside other nurses with different nationalities. Evidences that suggest Filipino nurses are culturally competent (n=3) did not represent that of the nurses caring for patients with mental illness in the Philippines.

Conclusion: Given mixed evidences and limited data in the literature, further research is essentially needed to improve quality nursing care and the development of interventions intended to reduce mental illness stigma which can be integrated in the community, school, workplace and other settings in the Philippines.

Keywords: Culture competency, mental health, nursing, stigma, Filipinos, Philippines

Introduction

Providing competent care to patients belonging to different cultures with stigmatizing health conditions, such as those with mental illness is a challenge for nurses. The task becomes doubly challenging since the nurses bring to the healthcare setting their own cultures which may be different from those of their patients. Indeed, a patient and a nurse, supposedly of the same country and ethnic group, may actually differ in social class, religious practice, language, and traditional beliefs about illness and recovery (Bhui et al., 2007).

This is true for Filipinos, as their collective culture is a blend of different ethnic cultures (Sanchez & Gaw, 2007). The Filipino culture evolved from a mixture of indigenous practices which date back before the Spanish colonization and the Catholic religious concepts brought during that colonization from the fifteenth to the eighteenth century (Abad et al., 2014). In addition, the US colonization also left an indelible mark on Philippine culture, education, and political system (Rivera & Antonio, 2017).

Culture is a social construct and more than just race or ethnicity, it also involves other determinants such as age, gender, education, religion, socioeconomic status, occupation (Giger, 2014; Purnell, 2012), and disability – both physical and mental (Campinha-Bacote, 2003). It affects every aspect of an individuals' life, including how he/she experiences, understands, expresses, and addresses emotional and mental distress. Thus, it is essential that all healthcare providers be able to provide care that acknowledges this influence (Campinha-Bacote, 2002; Purnell, 2002).

Inability to recognize the influence of culture can result in negative and stigmatizing attitudes that unfortunately, were found even among health professionals, including nurses, who were working in mental health facilities (Hansson et al., 2013; Ross & Goldner 2009). Patients who experienced symptoms of a psychiatric illness expressed that healthcare providers and nurses were the primary contributors to stigmatization (Ross & Goldner, 2009). Stigma, as defined by Hinshaw (2007), is a pervasive and global "devaluation of certain individuals on the basis of some characteristics they possess, related to membership in a group that is disfavored, devalued, or disgraced by the general society" (p.23).

Consequently, the negative and stigmatizing attitudes exhibited by nurses can result in the patients' feelings of worthlessness and inferiority that can negatively impact the course of their illness and ability to care for themselves (Corrigan & Watson, 2002; Corrigan et al., 2003). In a study by Sirey et al. (2001), persons who experience stigma are more inclined to be noncompliant towards recommended mental health care and prescribed medications; persons who experience lower levels of stigma are more likely to adhere to them. The detrimental effect of negative and stigmatizing attitudes on mental health help-seeking behaviors of people have been documented in developed countries (Alvidrez, Snowden, & Kaiser, 2008; Cooper, Corrigan, & Watson, 2003; Corrigan, 2004) and among Asian cultures (Fogel & Ford, 2005; Han & Pong, 2015; Mishra et al., 2011; Miville & Constantine, 2007; Shea & Yeh, 2008). Indeed, culture plays an important role in shaping attitudes and social interactions of individuals with mental illness, as well as on its treatment (Abdullah & Brown, 2011).

Therefore the growing diversity of people worldwide, the changing demographics, and the long standing disparities in the health status of people brought about by this diversity have challenged health care providers to consider cultural competence as a priority (Campinha-Bacote 2008). Recognizing the gravity of health disparities brought about by this growing diversity, the American Nurses Association (ANA) in 2015 took a lead in revising the scope

and standards of nursing practice by including the standard of Culturally Congruent Practice. It is articulated in this standard that nurses must demonstrate this practice through the process of cultural competence (Marion et al., 2016). Though not a new idea to the Western healthcare setting, it is new to the Philippine setting, more so to its mental health care system.

Considering that culture plays a significant role in influencing the attitudes of nurses towards mental patients, it is necessary for the nurses to be culturally competent. It is in this context that this review is undertaken. Although an abundance of literature exists regarding the attitudes of nurses toward people with mental illness, there is scarcity in the literature on these concepts in relation to Filipino nurses. Therefore, the objectives of this scoping review are the following: a) to determine the attitudes of Filipino nurses towards patients with mental illness, and b) to identify evidence related to cultural competency of Filipino nurses in caring for patients with mental illness.

This review will contribute to current nursing knowledge by providing an overview on the attitudes and cultural competency of Filipino nurses caring for patients with mental illness. In addition, the review can inform mental health care trainings, education programs, and future researches intended to reduce mental illness stigma in the Philippines. For the purposes of this paper, Filipino nurses refer to Filipino nurses living in the Philippines; and patients refer to Filipino patients also living in the Philippines.

Methods

This scoping review was guided by Arksey and O'Malley's (2005) framework. This kind of review is of particular use when a body of literature has not yet been comprehensively reviewed, or exhibits a large, complex, or heterogeneous nature not amenable to a more precise systematic review. It is defined by Colquhoun et al. (2014) as "a form of knowledge synthesis that addresses an exploratory research question aimed at mapping key concepts, types of evidence, and gaps in research related to a defined area or field by systematically searching, selecting, and synthesizing existing knowledge". This review followed the five key stages of Arksey and O'Malley's framework, which are the following: Identifying the research question, Identifying relevant studies, Study selection,

Charting the data, and Collating, summarizing and reporting the results.

Identifying the research questions

The research questions arose from the need to see the cultural competency of Filipino nurses caring for patients with mental illness, due to the known fact that culture plays a significant role in shaping attitudes and social interactions of individuals with mental illness, as well as in its treatment (Abdullah & Brown, 2011). Hence, the questions that guided this review are the following:

a) What are the attitudes of Filipino nurses towards patients with mental illness, and

b) What are the evidences that Filipino nurses are culturally competent in caring for patients with mental illness?

Identifying relevant studies

To identify relevant articles or studies, a systematic search in the electronic databases of ProQuest, Ebscohost, and Google for the gray literatures was done from July to August 2018. The initial search using the concepts 'culture', 'mental health', 'nursing', and 'stigma' and the related keywords as search terms (see Table 1) generated a large volume of irrelevant papers.

Table 1. Concept	Table 1. Concepts and Search Terms							
Concepts	Related keywords as search terms							
Culture	Culture competence, culture competent care, culture care							
Mental health	Mental illness, mental disorders, psychiatric illness, psychiatric disorder,							
	depression, schizophrenia, psychosis, bipolar disorder							
Nursing	Nurses, nurse practitioners, registered nurses, mental health nurses, community							
	health nurses, health providers, healthcare professionals, mental health							
	professional, Filipino nurses							
Stigma	Stereotype, Stigma, prejudice, discrimination, negative attitudes							

Table 1. Concepts and Search Terms

Table 2. Inclusion and Exclusion Criteria

Inclusion criteria	Exclusion criteria				
English language	Non-English language				
Published in 2000 onwards	Published prior to 2000				
• With full text	• Without full text				
	• Dementia, Alzheimer's Disease, substance				
	abuse, eating disorders, and suicide				
	• Student nurses, nurse educators,				
	doctors/physicians, psychiatrists, and				
	psychologists				

Study selection

To reduce the large volume of irrelevant articles, the inclusion and exclusion criteria were developed (see Table 2). Instead of a 5-year range search, the search range was extended to not earlier than 2000 because the topic has not yet been comprehensively reviewed and exhibits a heterogeneous nature. The articles were judged for relevance first by titles, and then by abstracts; if no abstract was available, the article text was read to check whether it was relevant to the review objectives. The reference lists of the identified literatures were also scanned for possible inclusion of other relevant articles. Given that the population being reviewed are Filipino nurses in the Philippines, the search strategy included the term "Filipino". In addition, due to the scarcity of researches on mental health in the Philippines, research involving Filipinos and Filipino nurses living or working in other countries and alongside other nationals were included for review.

Excluded for empirical studies were topics on dementia, Alzheimer's Disease, substance abuse, eating disorders, and suicide. Studies in relation to student nurses, nurse educators, medical doctors or physicians, psychiatrists, and psychologists were also excluded. A total of 3,545 potential articles from January 2000 to August 2018 were identified from the databases of Ebscohost, Proquest, and Google. Initial screening resulted in 250 papers of which only 59 papers met the eligibility criteria. A full text review resulted to 19 articles retained for

synthesis. An additional of 17 papers were included from searching the reference lists of the eligible papers. After another thorough review, a total of fourteen articles were retained for the final review and synthesis. A full outline of the study selection is provided in Figure 1.

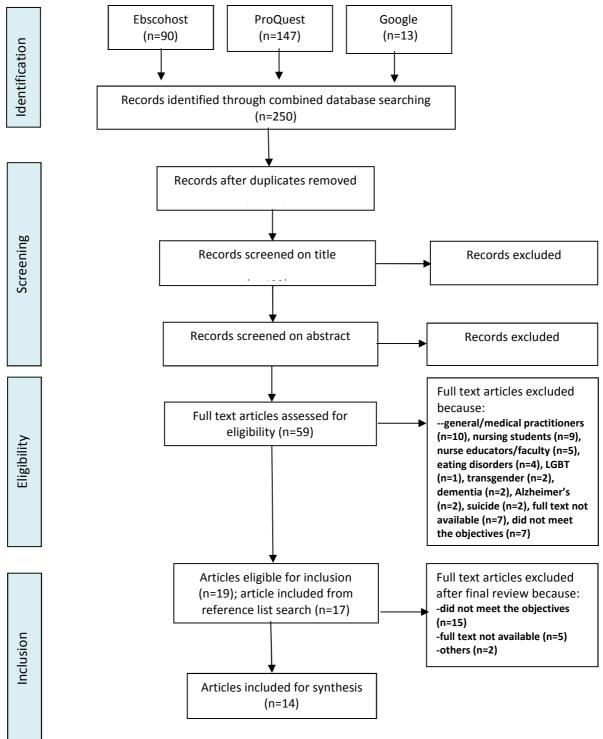


Figure 1. Flow diagram of study selection

Charting the data

Arksey and O'Malley's (2005) suggested charting format for organizing the data includes: Author(s), year of publication, study location, intervention type and comparator (if any); duration of the intervention, study populations (carer group; care recipient group), aims of the study, methodology, outcome measures, and important results.

For this review, a modified version of the charting format was done and includes the following (see Table 3): Author(s), title of article/study, year of publication, country of origin study population/sample, purpose/aim of the study, methodology, and key findings. However, complete charting of the data was not possible when articles did not provide sufficient information such as the articles relevant to the attitudes of Filipino nurses.

Results and Discussion

There were fourteen (n=14) articles included in the final review and synthesis, eleven (n=11) for the attitudes on Filipino nurses and three (n=3)on cultural competency of Filipino nurses. Five (n=5) studies were of quantitative design, one (n=1) for focus group, and one (n=1) literature review. The rest were news articles (n=4), and other gray literatures (n=3). Most of the articles were from the Philippines (n=4), United States (n=3), Saudi Arabia (n=3), while the rest were from other countries (n=4), such as Australia, Kuwait, United Kingdom, and Ireland.

Articles related to the attitudes of Filipino nurses

According to The Filipino Nurse magazine in their October 2008 issue, Filipino nurses are generally hard working, genuinely caring, respectful, patient, submissive, happy, and peaceful, and they blended readily with America and its immigrants from all over the world. In addition, a US-based Filipino lawyer, cited in his speech during the Filipino Nurses Global Summit at the Blue Leaf Filipinas in Pasay City, that Filipino nurses working abroad are better trained, reliable, caring and compassionate; because Filipino nurses come from a caring culture where families take care of sick and aging relatives (Cal, 2018).

Likewise, the Dean of the University of the Philippines College of Nursing, who did her post-doctoral study in Sydney, shared an anecdote of meeting a nurse manager of a New York hospital at an international forum she attended and told her that she really like the way Filipino nurses are trained (Nursing Review, 2017). Moreover, the Director of Nursing at St James's Hospital in Ireland, said that Filipino nurses are as good as their nurses and are gentle and respectful (Pollack, 2017).

These positive remarks are similar to a blog on what makes Filipino nurses the best in the nursing profession. According to the blog in INSCOL (2016), Filipino nurses are versatile, are quick learners, and are mood lifters because they share funny anecdotes or jokes to lighten up patients; they have a "never say NO" attitude toward job responsibilities, are well known for their caring and loving attitude, and are regarded as the most compassionate nurses.

With all the positive qualities accorded to the Filipino nurse, it is not surprising to hear in the ABS-CBN News how US President Barack Obama praised a Filipina nurse as one of the heroes of the Hurricane Sandy disaster in 2012. In his State of the Union address before the joint session of Congress in Washington D.C. in 2013, President Obama encouraged the audience to follow the example of the nurse who devised a rescue plan that kept the twenty newborns in her care, safe from the destruction of the hurricane (Jaleco, 2014). The nurse, who was born, raised, and educated in the Philippines represented all the Filipino nurses - skilled, efficient, caring, and compassionate, making them highly valued among nurses around the world (Sentosa Recruitment Agency, 2016). Overall, the articles reviewed convey a picture of Filipino nurses who caring sincere, patient-centered, are and compassionate that are indicative of positive attitudes towards patients. However, there was no mention about mental patients or mental illness in the reviewed articles.

On the other hand, a new study found that the proportion of nurses trained overseas was significantly linked to how patients felt about their care (Donnelly, ed., 2015). The study found that hospitals with the highest proportion of foreign nurses had the highest levels of patient dissatisfaction, with patients more likely to say they struggled to understand staff, and less likely to feel treated with dignity. Thirty-percent (30%) of the foreign nurses that the study were referring to came from the Philippines, twenty-four percent (24%) from India, and nineteen percent

(19%) from countries in Africa (Donnelly, ed., 2015). Though this study did not directly say that the Filipino nurses caused the patient dissatisfaction, it may lead to question the kind of attitude and behavior the Filipino nurses exhibited making their patients dissatisfied with their care.

Meanwhile, the only study that involves Filipino nurses and mentally-ill patients is the study by Al-Awadhi, et al. in 2017. The study described the attitude of nurses toward mentally-ill patients in a general hospital in Kuwait. There were 308 nurses who participated in the study. Eighty-five percent (n=240) were non-Arabs in origin and were from Asian countries like India, Philippines, Indonesia and Pakistan. The background characteristics of the nurses were collected including ethnicity. Overall, the mean scores on the four subscales of the tool that was used, which was the Community Attitudes toward the Mentally III suggest that the attitudes of nurses from India, the Philippines, Indonesia and Pakistan toward mental illness were generally negative (Al-Awadhi, et al.). However, the number of Filipino nurses in the study were not stated.

Perhaps, this remark from a Filipino nurse can provide a glimpse in to how a Filipino nurse may stereotype mental patients. She said, "I have never had a confused patient in the Philippines, unless it is on the psychiatric ward" (Vestal & Kautz, 2009). This is an example of stereotyping that indicates a negative implicit attitude that shows lack of cultural sensitivity in dealing with mental patients. Implicit attitudes often exist outside of conscious awareness and thus are difficult to acknowledge and control (Hall, et al., 2015). Thus, according to Hall, et al., even if nurses consciously and deliberately provide a desirable and equitable care to many, nurses may unintentionally behave or interact with patients less effectively with others. However, this cannot be generalized to include all Filipino nurses because there are other cultural factors or determinants. such as demographic characteristics that have to be considered that can influence attitudes towards mental health and illness. With the differences in the demographic characteristics. the conceptualization and understanding of mental illness or psychological distress may also differ.

As mentioned, current information about Filipino nurses' attitudes towards patients with mental illness is still limited and most of the data that formed this review are extrapolations from the gray literatures on Filipino nurses in the United States, Australia, Ireland, and Kuwait, and Filipino nurses alongside other nurses from India, Indonesia, Pakistan, and Africa.

Studies related to cultural competency of Filipino nurses

There are only three empirical studies that show Filipino nurses are culturally competent. In the dissertation study by Albougami (2016), he examined and compared the perceptions of expatriate nurses in Saudi Arabia regarding the relationship between cultural competence and patient-centered care. Perceptions were obtained by conducting a descriptive, cross-sectional, correlational survey design, using a purposive sample of expatriate nurses from the Philippines (n=81) and India (n=67) who work at the Ministry of Health in Riyadh. The nurses completed two surveys using the Cultural Competence Assessment and Individualized Care Scale-Nurse Version. The findings reveal that Filipino nurses have greater perceived cultural awareness and sensitivity and that they demonstrate more culturally competent behaviors compared to Indian nurses (Albougami, 2016).

Similar findings were also seen in the study of Inocian, et al. (2015). The study aimed to determine the level of competence among expatriate nurses in providing culturally competent nursing care in a University Hospital in the Kingdom of Saudi Arabia. The Individual Assessment of Cultural Competence was utilized in getting the responses of expatriate nurses from India (n=312), Philippines (n=228), Jordan (n=27), Pakistan (n=8), Nigeria (n=8), and Sudan (n=1). The findings showed that Filipino nurses as well as the Indian nurses showed competence in providing culturally congruent nursing care and there was a significant difference in their cultural competency when grouped according to age, gender, educational status, nationality, and length of service (Inocian, et al., 2015).

Another study by Alsulaimani (2014), determined the self-efficacy of Filipino nurses working in the Hospitals of Taif city, Saudi Arabia, in practical construct as part of their transcultural competency assessment using the Cultural Competence Education Resource toolkit. A total of 307 respondent nurses were included using the simple random sampling fishbowl technique.

Table 3. Description of the Selected Articles for Review

Author/s	Title of Article/Study	Year of Publication	Country of Origin	Study Population/ Sample	Purpose/Aim of the Article/Study	Methodology	Key findings (if any)
Al-Awadhi, A., Atawneh, F., Alalyan, M.Y., Shahid, A.A., Al-Alkhadhari, S., & Zahid, M.A.	Nurses' Attitude Towards Patients with Mental Illness in a General Hospital in Kuwait	2017	Kuwait	308 nurses	To describe the attitudes of nurses toward subjects experiencing mental illness and determine if the attitude was related to their sociodemographic characteristics.	Descriptive correlational	The mean scores suggest that the attitudes of nurses from India, Philippines, Indonesia and Pakistan toward mental illness were generally negative
Inocian, E.P., Atallahb, M., Mouflehc, M., Fadend, M. & Eide, S.	Cultural Competency among Expatriate Nurses in Saudi Arabia	2015	Riyadh, Saudi Arabia	228 expatriate Filipino nurses	To determine the level of competence among expatriate nurses in providing culturally competent nursing care	Descriptive	The mean score reflects the need to enhance further the cultural knowledge and skills among expatriate nurses, especially the Indians and Filipinos.
Albougami, A.	The Relationship between Cultural Competence Levels and Perceptions of Patient Centered Care among Filipino and Indian Expatriate Nurses working in the Saudi Arabian Healthcare Sector	2016 Dissertation	Saudi Arabia	81 Filipino Expatriate Nurses	To examine and compare the perceptions of expatriate nurses in Saudi Arabia regarding the relationship between cultural competence and patient-centered care	Descriptive, cross- sectional, correlational	Findings reveal that Filipino nurses have greater perceived cultural awareness and sensitivity and perceive that they demonstrate more culturally competent behaviors compared to Indian nurses
Alsulaimani, A.A.	Practical competency of Filipino nurses working in Taif city, Kingdom of Saudi	2014	Taif City, Saudi Arabia	307 Filipino nurses	To investigate the practical competency of Filipino nurses working in five hospitals of Taif City	Descriptive- evaluative	The findings of the study showed that Filipino nurses even if they don't have formal education on

	Arabia				Kingdom of Saudi Arabia		transcultural nursing or did not attend seminars on transcultural competency felt very confident in identifying through an interview, the specific cultural factors that could influence their client behaviors in accepting or rejecting care services to be given to them. However, they presented differences in their self efficacy perception in some practical construct scale according to their demographic profile
Donnelly, L. (Ed.).	Hospitals with more overseas nurses get worse rated	2015, December 3	UK	Filipino, Indian, and African nurses	To determine the relationship of foreign nurses to patient dissatisfaction	Quantitative	The study found that hospitals with the highest proportion of foreign nurses had the highest levels of patient dissatisfaction, with patients more likely to say they struggled to understand staff, and less likely to feel treated with dignity. Thirty- percent (30%) of the foreign nurses that the study were referring to came from the Philippines,
Vestal, V. & Kautz, D. D.	International perspectives: Responding to similarities and differences between Filipino and American nurses	2009	United States	Filipino and American nurses	To examine major challenges and ways that the nursing staff could help Filipino nurses adapt to working in a US hospital.	Focus groups	The focus group data showed that the Filipino nurses viewed positively the organization's efforts to assist them to acculturate.

Hall, W.J., Chapman, M.V., Lee, K.M., Merino, Y.M., Thomas, T.W., Payne, K., Coyne- Beasley, T.	Implicit racial/ ethnic bias among healthcare professionals and its influence on health care outcomes	2015	United States	US participants	To investigate the extent to which implicit racial/ ethnic bias exists among health care professionals and examine the relationships between health care professionals' implicit attitudes about racial/ethnic groups and health care outcomes	Literature Review	Most health care providers appear to have implicit bias in terms of positive attitudes toward Whites and negative attitudes toward people of color.
Pollack, S.	Ireland's Filipinos: caring for our young, old and sick.	2017, July 29	Ireland			Gray literature	
Jaleco, R.	Obama praises Filipina nurse in State of the Union address	2013, February 13	Philippines			Gray literature	
Cal, B.	US-based Pinoy cites Filipino nurses' contribution to global health	2018, January 26	Philippines			Gray literature	
Nursing Review	Filipino nurses: Our fastest-growing nursing workforce	2017	Sydney, Australia			Gray literature	
The Filipino Nurse	Nars! Nurse! Pinoy Lifestyles in White	2008	New York			Gray literature	
INSCOL	Rocking Traits of Filipino Nurses!	2016, August 11	Philippines			Gray literature	
Sentosa Recruitment Agency	Why Filipino Nurses Are In High Demand	2016, April 28	Philippines			Gray literature	

The nurses were selected regardless of their position as staff nurse, assistant head nurse, head nurse. nurse educator. nurse administrator/supervisor and assistant nursing director. Of the 307 respondents, only 22 nurses were from the Mental Health Hospital. All the nurses who participated in the study were graduates of Bachelor of Science in Nursing, and the majority were working as staff nurses (84.4%). All the participating nurses had no formal training or did not attend seminars on transcultural competency. The findings of the study showed that Filipino nurses, even if they don't have formal education on transcultural nursing or did not attend seminars on transcultural competency, felt very confident in identifying through an interview the specific cultural factors that could influence their client behaviors in accepting or rejecting the care services to be given to them. They felt very confident that they can discuss different topics regarding culture specific health care. However, they presented differences in their self-efficacy perception in some practical construct scale demographic according to their profile (Alsulaimani, 2014).

The above studies have shown that Filipino nurses are culturally competent. However, the three studies primarily focused only on determining the culture competency of Filipino nurses and not towards patients with mental illness. In addition, the studies were done in a different context or setting (Saudi Arabia) which may not be applicable to Filipino nurses living and working in the Philippines.

Summary and Recommendation

This scoping review arose from the need to see the attitudes and cultural competency of Filipino nurses in caring for Filipino patients with mental illness. A systematic search in the electronic databases of ProQuest, Ebscohost, and Google for the gray literatures was done resulting to eleven (n=11) articles for the attitudes on Filipino nurses towards patients with mental illness and three (n=3) studies on cultural competency of Filipino nurses in caring for patients with mental illness.

The evidences on Filipino nurses' attitudes towards patients with mental illness are limited. Most of the information on this topic are extrapolations from the empirical studies and gray literatures on Filipino nurses in the US, Australia, Ireland, and Kuwait, and Filipino nurses alongside other nurses from India, Indonesia, Pakistan, and Africa. The gray literatures have presented the good qualities of Filipino nurses that are indicative of positive attitudes, but not exactly towards patients with mental illness. Only one study suggests that Filipino nurses may have negative attitudes towards patients with mental illness.

Meanwhile, there were three studies that suggest Filipino nurses are culturally competent in nursing care. However, the studies were done in a different context or setting which may not reflect the cultural competency of Filipino nurses living and working in the Philippines.

Therefore, there is a need for further research or a systematic review on the attitudes and cultural competency of Filipino nurses caring for patients with mental illnesses in the Philippines. Studies on these topics are essentially needed to improve quality nursing care and to the development of interventions intended to reduce mental illness stigma which can be integrated in the community, school, workplace and other settings in the Philippines. According to the Department of Health (2008), in its report in the Health Policy Notes, lack of current studies and promotional programs on mental health are among the reasons for the existing mental health stigma in the country.

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