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*Home Health Care Management Practice* 2010 22: 499 originally published online 13 August 2010

DOI: 10.1177/1084822310375505

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# A Collaborative International Community Health Nursing: Clinical Experience in China

Home Health Care Management & Practice  
22(7) 499–506  
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DOI: 10.1177/1084822310375505  
http://hhcmp.sagepub.com  


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## Abstract

With increasing changes in the demographic characteristics of the U.S. population, providing culturally competent health care to patients has become an important component of nursing. Study abroad experiences can enhance students' international perspective, facilitate personal and professional growth, develop cultural competence skills, and help students better understand other cultures and global issues. This article describes University of North Carolina at Greensboro nursing students' clinical and cultural experiences with Wuhan University, Hope School of Nursing, in China. The international community health nursing experience in China provided students with opportunities to become immersed in Chinese culture, examine the health care system in China, and see the Chinese people and the world from a different perspective. Clinical experiences for the University of North Carolina at Greensboro nursing students included community assessments, home visits, Western and traditional Chinese medicine hospital visits, a health fair, and a health education program presented to community residents in Wuhan. Through their experiences, students learned how to appreciate and respect a culture that is different from their own and enhanced their skills in providing culturally competent care to diverse populations in the United States.

## Keywords

Study abroad experience, international community health nursing clinical experience, culturally competent care, China

The composition of the U.S. population is changing dramatically with ethnic groups increasing over time. In fact, by 2025 it is expected that minority groups will make up almost half the population. Whites will decrease to 53%, whereas there are projected increases among Latinos to 23%, African Americans (16%), and Asians and Pacific Islanders (10%; U.S. Census Bureau, 2008). With these changes in demographic characteristics, learning to provide culturally competent care to patients is becoming an important component of nursing education. One strategy for developing cultural competence is to provide nursing students with international clinical experiences through short-term study abroad programs for immersion and learning in another culture (Harrison & Malone, 2004; Maltby & Abrams, 2009). Study abroad can enhance international perspective, facilitate personal and professional growth, change worldviews, develop skills in cultural competence, and lead to a better understanding of other cultures and global issues (Callister & Cox, 2006; Maltby & Abrams, 2009).

The University of North Carolina at Greensboro (UNCG) is located in Guilford County, in the central part of the state. The Center for New North Carolinians is one of 14 sites in the country to receive refugees and immigrants. At present Guilford County is host to families that speak more than

100 different languages. Therefore, it is important for those working in the health care field to learn alternative ways of knowing, thinking, and doing things. International clinical experiences provide opportunities for nursing students to gain a clearer understanding and appreciation of the cultural and life experiences of minority patients in the United States, especially by becoming a minority themselves in a clinical setting. This article describes UNCG nursing students' international clinical and cultural experiences with Wuhan University, Hope School of Nursing, in China.

## Background

One of the cultural competencies for baccalaureate nursing education required by American Association of Colleges of Nursing (2008) is to provide knowledge of social and

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cultural components that influence nursing and health care across multiple contexts. Cultural competence has been defined as cultural awareness, cultural knowledge, cultural skill, cultural encounters, and cultural desire (Campinha-Bacote, 1999). Study abroad experiences provide such an opportunity for nursing students to develop their cultural competence. Studies have reported that international experiences enhance students' personal and professional development and help clarify career paths or goals. Such a unique opportunity places nursing students in a situation to discover themselves, develop reciprocal relationships with others, and value the experience on multiple levels (Evanson & Zust, 2004, 2006). More important, study abroad experiences contribute to cultural sensitivity, competence, and self-confidence that help students further understand how socioeconomic and politics influence health and access to health care, locally, nationally, and globally. It is anticipated that experiences in working with people in a different culture and country could decrease ethnocentrism, specifically believing in one's own culture as being superior to another's (Haloburdo & Thompson, 1998, Maltby & Abrams, 2009).

To illustrate, Maltby and Abrams (2009) described a 3-week public health nursing study abroad experience in Bangladesh. A pattern emerged from the students' experiences revolving around what they have seen and how they interpreted what they have seen. Maltby and Abrams (2009) report repeated phrases from students' journals, which included "beginning to see," "thinking about the seen," "wanting to change the seen," and "transformed by the seen." Placing students in a cultural context different from their own and different from their own training and experiences can help students begin to see different culture in a new light.

Although the exposure is brief, students do experience cultural shock when they encounter situations that are markedly different from their familiar routines. During the 2 or 3 weeks aboard, students experience what it is to be a minority, unable to communicate in the majority's language, and to be exposed to new sounds, smells, foods, ways of dress, and getting around and observe differences in health care systems. Immersion in a different culture helps the nursing students develop an understanding and an appreciation for new cultures and people. Nursing students who have participated in international clinical experiences report that the experience fostered a new cultural awareness for themselves, a new openness to cultural difference and personal insights into how to improve their communications skills despite language barriers (Haloburdo & Thompson, 1998). However, Kirkham, Hofwegen, and Pankratz (2009) describe the international learning experiences as profound but difficult to translate and sustain. Students acquire some social consciousness by learning in international settings; however, sustaining this awakened social consciousness and translating this learning to their home settings can be challenging. For many, this was their initial international experience, and therefore,

the experiences can provide new ways of viewing the world and a new personal awareness of disparities and social injustices.

There are six domains through which international clinical experiences have a significant impact on cognitive growth. These domains include decision making, role of learner, role of teacher, role of peers, evaluation, and view of knowledge, truth, or reality for nursing students. However, these forms of cognitive growth were not as apparent in students who did not participate in a study abroad program (Frisch, 1990; Zorn, Ponick, & Peck, 1995). International clinical experiences provide embodied learning that provides a life-long experience for nursing students to grow as a person, to view the world from broad perspectives, and to be more culturally aware and sensitive, such experiences that a nursing student who has not participated in a study abroad experience might not develop.

## *Health Care and Community*

### *Health Care in China*

China has 1.3 billion people and approximately 58% of the population lives in rural areas. Life expectancy in China is 72 years for males and 75 years for females. The leading causes of death in China are cerebrovascular and cardiovascular diseases, cancer, respiratory diseases, and injury (World Health Organization, 2007). In rural areas, mortality is higher from communicable diseases, maternal and perinatal conditions, chronic obstructive pulmonary disease, and injuries, whereas in urban areas, high death rates are from cardiovascular health disease and cerebrovascular diseases. In addition, mortality rates from lung cancer, breast cancer, and leukemia are higher in urban areas, whereas mortality rates from esophageal and cervical cancer are higher in rural areas (Yang et al., 2008).

China's health care system has three levels in both urban and rural areas. There are university affiliated teaching and research hospitals at provincial levels and district hospitals and street-level hospitals in urban areas. In rural areas hospitals are at county, township, and village levels. Community health services are at the grassroots level in urban areas, which include community health centers and community health stations. In these centers or health stations, providers consist of primary physicians, public health doctors and nurses, rehabilitation physicians, Traditional Chinese Medicine doctors, and psychological counselors. With China's rapid and sustained economic development, the health care system in China has focused on providing basic medical care and health services to all people. Health care has become a top social priority in China for building an equitable society (Cheng, 2008; Ho & Gostin, 2009; Yip & Hsiao, 2008).

Primary health care and basic health care are delivered to the residents at community health service centers in their communities. The primary functions of the community health service centers are to provide public health, essential medical treatments, preventive health care, home care rehabilitation,

family planning, and health education (Min, 2006; Zuxun, Shuiyuan, & Tuohong, 2003). The primary health care is convenient, comprehensive, and, most important, affordable to people with low incomes (You, Lan, & Scarf, 2008). Community health service centers are primarily owned by the government and eventually will be established in every neighborhood in China to replace hospitals' expensive treatment and outpatient clinical services (Yip & Hsiao, 2008).

### Setting for the International Clinical Experience

Wuhan is a city in central China, in Hubei province, with a population of approximately 9 million. Wuhan has 118 community health centers, and under the community health service centers there are 411 health stations established by the municipal government health administration that provides basic medical treatment and care, prevention measures, and home visits to residents in the neighborhood. These community health service centers serve as community clinical sites for nursing students at Wuhan University, Hope School of Nursing. The UNCG has partnered with Hope School of Nursing for community health nursing clinical experiences since 2007, with three different groups of UNCG students traveling to China each April. The first year UNCG arranged for seven students to travel to China for community health clinical experiences, in the second year 11 nursing students and one physician participated, and the third year included 12 nursing students and 2 anthropology students who were studying medical anthropology.

Wuhan University, a major university in China, was founded in 1893 with 40,000 students. HOPE School of Nursing has undergraduate and graduate programs and has graduated more than 4,000 students since 1983. The nursing program was affiliated with Hubei Medical University before 1993; the HOPE School of Nursing was established with the help of Project HOPE (Health Opportunities for People Everywhere). Since 2007, the number of Chinese nursing students participating in the program had involved from less than 10 to now more than 60. Chinese nursing senior students partnered with UNCG students for clinical experiences in the communities in the city of Wuhan.

### Getting to China

In 2007, seven nursing students signed up for UNCG's first short-term study abroad to China. With a tourist hat on and eyes and minds open the students gradually worked into the rhythm of Chinese culture. They visited a number of famous tourist attractions, including the Tienamen Square, the Forbidden City, the Summer Palace, the Great Wall, and silk and jade factories during those first couple of days. The students were also learning about new foods and a new language and experiencing crowds like they had never seen before. After

2½ days in Beijing, the travelers flew to Wuhan where they spent 4 days working closely with Chinese nursing students. They visited three hospitals and conducted a health fair where they screened people for hypertension and diabetes. They spent the last day and a half in Shanghai where last-minute shopping took place and the last few authentic Chinese meals were consumed. It was also a time when the nursing students were on their own, managed to get around without the aid of interpreters, but relied on themselves and each other.

This initial experience was so successful that the following year 11 students and one physician signed up for the 2-week experience. There were three men and eight women, plus two faculty to help guide them with one of the faculty originally from Beijing. In 2009, 1 male and 11 female nursing students and 2 female medical anthropology undergraduates participated in the program.

To prepare for the study abroad program and their international clinical experience, the UNCG nursing students began their cultural awareness by researching various health-related topics (e.g., hypertension, diabetes, stroke, falling, and diet and exercise) early in the spring semester. They were divided into five teams and each was assigned one of the health care topics. Each group developed a PowerPoint presentation that focused on symptom awareness as well as prevention or management, depending on the topic. The students then compared the incidence of diagnosis and therapeutic regimens for the United States and China.

Their advanced preparations on health-related issues before departing for China was strategic, for the nursing students could become more focused on a comparative approach while in China. Their PowerPoint presentations were completed in advance and e-mailed to the Chinese nursing students who translated for the public health education forum. In addition, UNCG nursing students selected topics on history, culture, and historic sites of China and presented to each other prior to the departure. Thus, when they visited the historic sites, they had some general knowledge of the importance of culture for the Chinese people.

The arrival in Beijing was the beginning of many transformative cultural experiences undertaken by the students. The amount of knowledge shared during those first couple of days set the tone for the rest of the trip. Along the way students learned to shop on their own and some became expert barterers; they tasted new foods, mastered chopsticks, learned a few greetings, and learned a range of other things that helped them to acclimate for the rest of the journey. As one of students remarked from the 2008 trip, "so much happens in those first 2½ days that it is hard to believe all that we pack into 24 hours, including eating Peking duck and celebrating a birthday with longevity noodles" (Andreatta, 2008). In the words of one of other student,

So no internet or plug access for the first 3.5 days. It's been hard. Maybe the hardest thing to grow accustomed

to is the lack of Internet. I rely on the Internet. I know I rely on it for too many communications.” (Andreatta, 2008)

## Community Health Clinical Experiences

The next segment of the journey was in Wuhan, where UNCG students worked with Chinese nursing students from the HOPE School of Nursing. The program was designed to expose UNCG students to Chinese nursing care; help them learn about Chinese culture, health beliefs, and the roles of nurses in community and hospital settings; and enhance students' collaborative skills. The UNCG students and HOPE students prepared their presentations together and discussed how to go about conducting a windshield survey for the Chinese home visits. The discussion helped them learn about each other's culture. The combined activities of community assessment, family visits, health educational projects, health fair, and hospital visits with Wuhan University, HOPE School of Nursing, have facilitated the cross-cultural interaction and awareness through this short-term study abroad program.

### Community Assessment

One community health clinical objective is to apply the concept of environmental influences on the health of individual, families, groups, and communities to the delivery of nursing care. Each year of the program, UNCG nursing students have been paired with Chinese nursing students in five teams to conduct a community assessment in five different communities. Students walked through the neighborhood streets and used the community assessment tool “Learning About the Community on Foot” (Anderson & McFarlane, 2004) adapted from the Windshield Survey to assess a community and its environment. The modified Windshield Survey focuses on eight areas: community core (history, demographics, ethnicity, values, and beliefs), physical environment, health and social services, transportation and safety, politics and government, communication, education, and recreation. Students obtained demographic and health information on the population from community health centers or community health stations. Assessment data were collected while in the communities, analyzed, and reflected in students' clinical journals.

Through the community assessment, students had opportunities to observe the community they were in and get to know the Chinese people, their community, their culture, and their diseases. Students used the information to form a comparative community assessment of cultural values, transportation, safety, education, and recreation health care in the United States and China. For example, students observed that there were many recreation areas on the street in each community where residents could exercise on the street without cost. Each community also had its own community

service center and community health station. The UNCG students visited different parts of the city, some observing more affluent areas while others observed more poverty. These collective experiences fostered many discussions among the students and prompted further cultural exchanges between the Chinese and American students.

### Home Visits

UNCG students were accompanied by Chinese students and physicians from the community service centers and community health stations on make home visits to families living in the communities. Each student was assigned two families in the community. Before making home visits, students were required to assess the community in which the family lived and their home environment. Students did health assessments of individual family members with diabetes, hypertension, cardiovascular diseases, and arthritis. They also tested families' blood pressure and glucose levels during their home visits.

Students used the Family Assessment, the Instrumental Daily Activities of Living, and Environmental Safety Assessment tools to assess each family and discussed health concerns with the family members, relying on the Chinese nursing students for interpretation and translation. UNCG students also provided health education for family members on physical activity and diet. In the course of their health assessments, the UNCG students learned that many Chinese people use traditional Chinese medicines for chronic diseases.

### Health Education Project

A health education program was held for community residents at three community health stations in Wuhan. Health education topics were chosen in advance and based on the requests or needs of the community health service centers and community health stations in Wuhan. Faculty members at Wuhan University Hope School of Nursing coordinated the teaching sessions with coordinators from these community health centers/stations. All the materials were prepared by UNCG students before they left for China and were translated by Chinese nursing students. Handouts of the materials and basic educational pamphlets were distributed to the residents at the educational sessions. After the presentations, residents asked questions and UNCG students interacted with residents, with the Chinese nursing students interpreting. These sessions helped students to compare life styles between China and the United States in relation to the development of diabetes, hypertension, and cardiovascular diseases.

UNCG students partnered with Chinese nursing students to present on diabetes, cardiovascular diseases, depression, diet, exercise, tuberculosis, stroke, fall prevention, and nursing homes. The UNCG students discussed the incidence and prevalence, signs and symptoms, prevention and health

maintenance, and treatment plans for each problem and compared the prevalence and care to the United States. Approximately 30 to 40 community residents in each community health center attended the health education sessions. After the presentations, UNCG students provided blood glucose screenings to participants.

### *Health Fair*

A health fair was organized by the community health service centers in several communities in collaboration with Wuhan University, HOPE School of Nursing. The purpose was to give students an opportunity to provide care to community residents and meet the people from the community where the health service centers were located. A health fair was usually held on a street close to the community health center or health station for the residents in the community. The health fair teams included UNCG nursing students, Chinese senior nursing students, family physicians, dentists, and psychologists, and traditional Chinese medicine doctors. Health screenings and services provided to residents included measuring blood pressure, glucose, height, and weight for body mass index; waist circumference; as well as psychological and dental counseling. Each year, 250 to 300 residents came to the health fair and for screening. Health education was also provided to the residents. A number of cases of both high glucose and high blood pressure were noted by the students. Referrals were made to doctors available for assistance at the health clinic.

Each year the health fair was well received by community residents and was reported in Wuhan in three local newspapers and aired on a Hubei province TV program. UNCG students and faculty were interviewed by both newspaper reporters and television program reporters. The students shared their cultural and clinical experiences with Chinese people. The director of the nursing program, Professor Yu Liping, remarked that this media attention provided great visibility for the health clinics and encouraged people in the surrounding areas to use the clinics for preventive health care.

The community health clinical experience in Wuhan also included a research project. With the help of Chinese nursing students, a health survey was conducted to examine health status among residents in Wuhan. The health survey was administered during the health fair.

### *Visiting Western and Traditional Chinese Medicine Hospitals*

Our community health nursing clinical experience has included a visit to hospitals in Wuhan to compare health care delivery in China and the United States. The People's Hospital and Zhongnan Hospital are two major teaching hospitals with more than 1,000 beds; they are affiliated with Wuhan University. Discussions with the director of the nursing

department and unit managers were held following the hospital visits. The UNCG students were accompanied by several Chinese nursing students, who served as translators, as they visited hospital units, including the emergency room, pulmonary unit, cardiovascular unit, and dialysis center. Physicians and unit nurse managers gave an introduction to their units and patients' conditions.

The students also visited a traditional Chinese hospital to observe the use of traditional Chinese herbs, acupuncture, acupressure, massage, and cupping treatment for patients with stroke, arthritis pain, and back pain. It was an eye opening experience for students to see how traditional Chinese medicine works and how it is being used to relieve pain and help patients with rehabilitation. These hospital observations helped UNCG students better understand the health care system as well as the cultural beliefs and values of the Chinese people with respect to health care choices. Students were interested in experiencing the different therapies, and several were interested in trying acupuncture, but time only permitted several students to experience cupping. To their surprise, cupping did not hurt but helped draw energy to sore areas of the body.

### *Discussions With Directors of Community Health Centers*

At the end of the clinical experience in Wuhan, UNCG students, Chinese students, faculty members from both schools, and the directors of each community health station and community health center held a discussion about community health care and provided feedback on the health fair and home visits. For example, students had some concerns about families and their access to health care and provided the information to the nurses and physicians at each center and their questions were answered by members of the center.

UNCG students shared their clinical experiences with Chinese students and the directors of community centers. Profound friendships developed between the two universities' students, and neither wanted the experience to end, and many shared tears. A Chinese nursing student concluded the debriefing in 2008 with a poem, a gift of friendship. The director of the clinics gave a gift of the Crane Tower, a famous place that all of the UNCG students had visited while in Wuhan. And in all 3 years the last night before departing to Shanghai included a cultural gift exchange for the students. The UNCG students shared things of American or North Carolina culture, and the Chinese students shared more of their culture.

### **Cultural Experiences**

On arrival in Wuhan, 3 days into their China experience, the UNCG students were overwhelmed and tired. Their lifeline was working with Chinese students. Together these teams of

students provided wellness checkups to Chinese residents, made home visits and visited Western and Traditional Chinese hospitals, and experienced Chinese and American culture.

The hospital tours provide an opportunity for UNCG and HOPE students to discuss similarities and differences in health care practices, training, and the technology available for administering care. When comparing U.S. hospitals with Renmin Hospital, Renmin Hospital did not have biohazard containers for their needles, and their medicine carts were lacking in materials. For example, the crash carts did not have defibrillators and they had older models of medical equipment in the units (vital sign monitors, etc.). The medical staff did not use gloves and many wore open-toed flip-flops. There were a few available waste receptacles, private patient rooms were nonexistent, and the waiting areas were crowded, busy, and most of the time noisy. Yet Renmin Hospital provided basic care to everyone and had RN projects funded by the government and was well known for the care their doctors provided.

Visiting the different units at each of the teaching hospitals was an eye opener for all of the UNCG students. As one shared with Andreatta (2008),

In many ways, China was like going back in time to when there was not fancy-schmancy machines to do all the work for you. I'm so accustomed to advanced technology from working in the PICU that I don't know how to do simple nursing skills without it! I had to ask our Chinese partners how they did things so that I was sure to get accurate data collection. For instance, when taking blood glucoses, their scale is anything less than 7 is normal. If I had been writing down 120, a normal American CBG, they would have freaked!

The Chinese students worked very closely with the UNCG students, helping translate everything for the American students who knew no Chinese. After the health fair where teams worked very hard for 3 to 4 hours doing health screenings, the Chinese students took the UNCG students out to lunch to share traditional local foods. Each time the UNCG students marveled at the food and how they had learned to eat with chopsticks. The UNCG students from 2008 reciprocated by inviting the Chinese students join them at Pizza Hut, for a Chinese–American style pizza. For several of the Chinese students, it was their first time at a Pizza Hut (for the cost is nearly 10 times what a traditional meal might cost) and their first time using a fork.

In the 3 years this program has been in place, the cultural sharing that emerged from these intense working experiences has been life transforming. Friendships were made and continue. The 2008 UNCG nursing students introduced Facebook to the Chinese students. "Now," they said, "we can be friends forever and stay in touch." The comments made orally and in their journals from the groups of students and

for each year are very moving. Some of the comments from the nursing students from the 2009 group were to the effect they would never treat a patient who could not speak English poorly again (Andreatta, 2009).

## Conclusion

Overall, through the past three study abroad experiences our nursing students have been exposed to another culture and observed nursing and health facilities in China. The UNCG students summed up their experiences:

My time spent in China was well worth it and I am so glad that I went on the trip. . . . My eyes are now open to the different possibilities of the world and a new appreciation for America. . . . I found it impressive how the community health centers were run and America could try some of the techniques of having health centers close by or even in the community. . . . I have a new understanding for the Chinese culture and how it affects the nursing profession. . . . The school system and also the government in China has a huge impact on their health care system which was interesting to see. This trip has inspired me to learn more about other cultures and travel more to understand other health care systems.

Clearly, the clinical and cultural experiences in China have transformed the students' lives. For example, at a postdinner meeting with the 2008 students, they were very concerned about the victims affected by the devastating earthquake that occurred in Sichuan because they now knew people in China. A flurry of e-mail messages were exchanged between the Chinese and UNCG nursing students to make sure everyone was all right. Among the students who participated in 2009 two have expressed interest in working for international health programs in their professional careers. Finally, some of the students in previous programs have expressed an interest in taking the trip again. This cultural exchange approach of understanding a different health care system sheds light on the fact that where there is common ground in biology or between Western medicine and traditional Chinese medicine, there is a different philosophy of practice. Approaches to health care are not always the same and that it is okay if one is prepared to look for and accept cultural differences from the outset.

## Acknowledgment

Thanks to Dr. Lynne Pearcey, Dean, School of Nursing, UNCG and Dr. Marcia Petrini, Dean, HOPE School of Nursing, Wuhan University, for her support to the program.

## Declaration of Conflicting Interests

The author(s) declared no conflicts of interest with respect to the authorship and/or publication of this.

## Funding

The author(s) disclosed receipt of the following financial support for the research and/or authorship of this article:

Jie Hu was supported by UNCG's School of Nursing for her coordination of this short-term study abroad program. Susan Andreatta was supported by The University of North Carolina at Greensboro's Kholer Fund, the College of Arts and Sciences, and the Department of Anthropology through the Harriet Kupferer-Outwin Professional Development Fund and UNCG's School of Nursing.

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