

LITERATURE REVIEW TEORI TRANSCULTURAL NURSING MADELEINE LEININGER

Susi Agustina Lasmaida^{1*}, Blacius Dedi²

STIK Sint Carolus Jakarta, Indonesia

susi.lasmaida24@gmail.com

ABSTRACT

Transcultural nursing is the study and practice of nursing that focuses on the similarities and differences in cultural values, beliefs, and actions, both individuals and groups. The goal is to provide nursing actions that are based on universal culture and specific culture, both in providing health promotion, and helping patients deal with unpleasant conditions, illness, death where culturally meaningful. This research uses a literature study method analyzed from several journals, research results, using internet media related to the topic taken. The results showed that transcultural nursing is a nursing care process that is focused on individuals and groups to maintain, improve healthy behavior according to cultural background. The study of nursing care in a cultural context is needed to bridge the differences in knowledge possessed by nurses with patients or clients. Transcultural nursing diagnoses can identify actions needed to maintain a culture that matches health goals, form a new culture that is appropriate to health, or even replace a culture that is not appropriate to health into a new culture. The planning and implementation of the transcultural nursing process is made after the nurse understands the cultural background of the patient or client, so that the actions carried out can be in accordance with the client's culture and health goals are achieved. The evaluation of transcultural nursing care is closely attached to the planning and implementation of the transcultural nursing care process. This theory can be used in providing nursing care by considering aspects of culture, values, norms, and religion. This theory can be used to complement other conceptual theories in nursing care.

Keywords: *Culture, Nursing, Transcultural*

This article is licensed under [CC BY-SA 4.0](https://creativecommons.org/licenses/by-sa/4.0/) 

INTRODUCTION

Indonesia is a country rich in cultural diversity. Culture is made up of many complex elements including religious and political systems, customs, language, tools, clothing, buildings and works of art. Language as well as culture is an inseparable part of human beings so many people consider it genetically inherited. Culture is a comprehensive pattern of life that is complex, abstract and extensive. Cultural aspects also determine communicative behavior. Cultural diversity in the world of nursing is known as *Transcultural Nursing*. Transcultural nursing is not limited to theory, but requires competence to prove the professionalism of nurses in providing care to patients. Transcultural nursing was first introduced in 1970 by *Madeleine Leininger*, an Anthropological nurse leader and nicknamed the "Intercultural Mother of Nursing". The theory of diversity and culture in care is called *the Sunrise Enabler* which symbolizes the "rising Sun". (Cherry, B., & Jacob, 2014).

Many conceptual models and theories have been developed by nursing experts, where theories and conceptual models are a way of looking, assessing work situations that guide nurses in obtaining information to make nurses sensitive to what is happening and what she should do. Nursing theories are also used in practice, research and teaching and learning processes in the field of nursing so that they need to be introduced, studied and developed to strengthen the nursing profession. Nurses need to have background knowledge both theoretically and empirically of existing nursing theories so that nurses can understand and

apply these theories in providing nursing services to clients according to their circumstances. One of the existing nursing theories is the nursing theory developed by *Madeleine Leininger* better known as the "*Trans Cultural*" theory. (Alligood, 2018) (Andrews, M & Boyle, 1995).

Transcultural nursing is an area of specialization and general practice. It focuses on cultures around the world and the phenomenon of comparative cultural, health, and nursing concern. Established as a formal field of inquiry and practice over forty years ago, the goal of transcultural nursing is to provide care that is culturally attuned. As one nursing leader in her field summarized, "Transcultural nursing is a collection of knowledge that helps us provide culturally relevant care". Transcultural nursing is the study and practice of nursing that focuses on the similarities and differences in cultural values, beliefs and actions of individuals and groups, with the aim of providing nursing actions based on universal culture and specific culture, both in health promotion and helping patients in dealing with unpleasant conditions, conditions of illness and death that culturally have significant value.(Felsenstein, 2019).

Nurses in carrying out their duties often face clients who have different ethnic, cultural and religious backgrounds. To deal with this situation, it is important for nurses to understand that clients have different views and interpretations regarding illness and health. One way to be able to understand clients is to understand their language. Language is very important. The inability to communicate is not only frustrating for both parties, but also poses a risk to patient safety. Language is a tool or cultural manifestation used by humans to communicate with each other or relate either through writing, oral or movement (sign language), with the aim of conveying the intention of the heart or will to the interlocutor. (Arumsari, D. P., Emaliyawati, E., & Sriati, 2017). Various problems can occur in the nursing process other than language, by studying various reference sources of transcultural theory from *Leininger* , understanding and application will make it easier for nurses to provide the best service.

A. Literature Review Teori Transcultural Nursing

1. History

Dr. Madeline Leininger, a nurse anthropologist, has a major hand in increasing research in transcultural care. She was a pioneer of transcultural nursing and a leader in developing transcultural nursing as well as human-focused nursing care theory. *Leininger* was also the first professional nurse to earn a doctorate in social and cultural anthropology. She has been a key nurse leader encouraging many students and faculty to pursue studies in anthropology and linking this knowledge to transcultural nursing practice and education. His enthusiasm and deep attention to the development of the field of transcultural care with a focus on human care has supported him for 4 decades. In the 1950s to 1960s, *Leininger* identified several common areas of knowledge and research between nursing and anthropology: the formulation of transcultural nursing concepts, practice and theoretical principles.

Her book *Nursing and anthropology : Two Words to Blend*, which was the first book in transcultural nursing, became the basis for the development of the field of transcultural nursing, and the culture underlying health care. His next book, *Transcultural Nursing : Concepts, theories, research, and practice*, identifies major concepts, theoretical ideas, practices in transcultural nursing; this evidence is the first definitive publication in the practice of *transcultural nursing*. In his writings, he points

out that transcultural and anthropological treatments are complementary to each other, albeit distinct. (Busher Betancourt, 2015)(Andrews, M & Boyle, 1995).

2. Konsep Transcultural Nursing

Main concepts of *Leininger's theory* (Husada, 2016) (Suroso, Haryati TS, 2015).

a. Human Care and Caring

Phenomena related to guidance, assistance, behavioral support in individuals, families, groups with events to meet both actual and potential needs to improve the conditions and quality of human life. Direct action directed at guiding, supporting and directing individuals, families or groups to real circumstances or anticipation of the need to improve human living conditions.

b. Culture

Culture is a learning, sharing and transmission of values, beliefs, norms, and lifestyles within a particular group that provides direction to their way of thinking, making decisions, and acting in life patterns.

c. Culture Care

Cultural treatment refers to subjective and objective learning and transmission of values, beliefs, patterns of life that help, support, facilitate or enable other individuals or groups to maintain their well-being, health, as well as to improve human living conditions or to enable people to face disease, obstacles and death.

d. Culture Care Diversity

Cultural diversity of care refers to variables, differences, patterns, values, lifestyles, or symbols of care within or between associations that are associated with providing assistance, support or enabling humans to perform a treatment.

e. Culture Care Universality

The unity of cultural care refers to a common sense of similarity or the most dominant understanding, patterns, values, lifestyles or symbols manifested among many cultures and reflecting the provision of aid, support, facilities or obtaining a means in which it is possible to help others not be used in an absolute way or a statistically significant finding.

f. Worldview

Worldview refers to the way humans view in maintaining the world or universe to present an upheld picture or value about their lives or the surrounding environment.

g. Cultural and Social Structure Dimensions

The dimension of social and cultural structure refers to a dynamic pattern and description of the structural relationships and organizational factors of a form of culture which includes religious, cultural, political, economic, educational, technological, cultural values and ethnohistorical factors and how these factors are related and function to influence human behavior in different environments.

h. Environmental Context

Environmental context refers to the totality of an environment (physical, geographical, and sociocultural), situation, or event with associated experiences that gives interpretive meaning to make human expressions and decisions with reference to a particular environment or situation.

i. Ethnohistory

Ethnohistory refers to the sequence of facts, events, or developments over time as known, witnessed, or documented about designated persons of a culture.

j. Emic

Emic refers to local, original, or insider views and values about a phenomenon.

k. Etic

Etics refers to outsiders' or more universal views and values about a phenomenon.

l. Health

Health refers to a state of well-being or a restorative state that is culturally formed, defined, assessed and practiced by an individual or group and that allows them to function in their daily lives.

m. Transcultural Nursing

Transcultural nursing refers to the formal field of humanistic and scientific knowledge and practice that focuses on holistic culture care phenomena and competencies to help individuals or groups maintain or regain their health and to deal with disability, dying, or others. The human condition in ways that are congruent and culturally beneficial.

n. Culture Care Preservation or Maintenance

Maintaining cultural care refers to all possible assistance, support, facilities or decision-making and professional actions that can help others in a particular culture and maintain the value of care so that they can maintain their well-being, recover from illness or face obstacles or death.

o. Culture Care Accommodation or Negotiation

Cultural care negotiation or accommodation techniques refer to all possible professional assistance, support, facilities, or decision-making and creative actions that help communities adapt to their culture or to negotiate with others to achieve favorable and satisfactory health outcomes through care professionals.

p. Culture Care Repatterning or Restructuring

Transcultural care restructuring refers to all the help, support, facilities or professional decisions and actions that can help clients to change or modify their way of life for the better and obtain a more favorable treatment pattern by respecting the beliefs and values that the client has according to his or her culture.

q. Culturally Competent Nursing Care

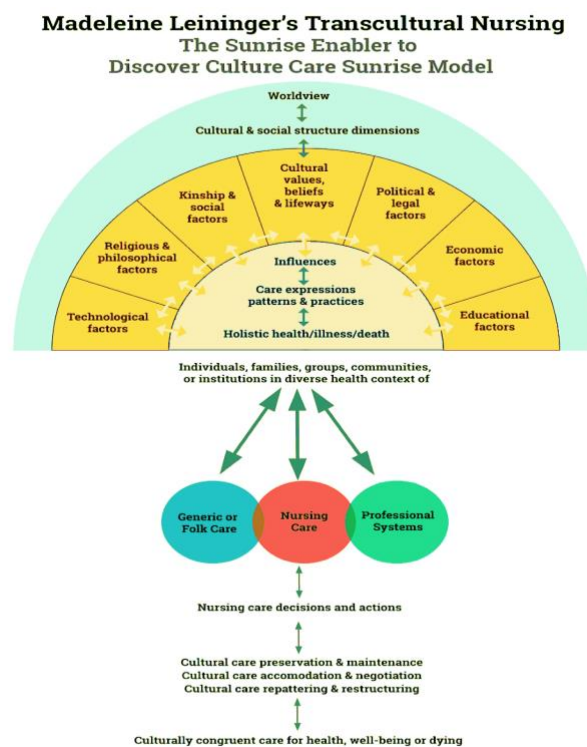
Culturally competent care refers to the explicit use of culture-based care and health knowledge in sensitive, creative, and meaningful ways to fit an individual or group's common life and needs for beneficial and meaningful health and well-being, or to deal with illness, disability, or death.

B. Transcultural Nursing Care

Sunrise Model of Leininger's theory can be seen in the figure below. The sun rises as a symbol of care. It is a force to start at the culmination of this model with a worldview and the idiosyncrasies of social structures to consider mind-opening directions in which this may affect health and care or be the basis for research focusing on nursing professionals and the health care system in general. Arrow means to affect but not to be the cause or line of relationship. The dotted line on this model indicates an open system. This model illustrates that the human body is inseparable from their culture. It is important to know that nursing problems and interventions do not appear in these theories and models. Leininger's goal is

for all of these terms to be associated with other care professionals. These nursing interventions are chosen without assessing the client's way of life or the values that will be perceived as a disorder, nor do nursing problems always correspond to what the client views are.

This model is a productive tool to provide guidance in assessment and treatment in line with culture and scientific research. (Busher Betancourt, 2015) (Yilmaz, M., Toksoy, S., Direk, D., & Bezirgan, 2017) (Garcia, G.C.R., Caicedo, J. I. M., Reina, H. A. R., Martinez, M. L. O., Segura, C. M. C. Pereira, L. A. M., Torres, 2016).



1. Study

Assessment is the process of collecting data to identify the client's health problems according to their cultural background. Assessment is carried out on adaptive and maladaptive responses to meet basic needs that are appropriate according to their cultural background. The study was designed based on 7 components in "*Leininger's Sunrise models*" in Leininger's *transcultural nursing theory*, namely: (Wulandari, 2016).

a. Technological factors

Health technology is a means that allows humans to choose or get offers to solve problems in health services. In relation to the use of health technology, nurses need to examine in the form of: client perceptions about the use and use of technology to overcome current health problems, reasons for seeking health help, perceptions of health-pain, medical habits or overcoming health problems. The reason the client does not want surgery and the client chooses alternative medicine. The client takes a blood laboratory test and understands the meaning of the test results.

b. Religious and Philosophical factors

Religion is a system of symbols that results in very realistic views and motivations for its adherents. Rationalism is a special feature of religion. Religion provides a powerful motivation to place truth above all else, even above one's own life. Religious factors that need to be studied by nurses such as: religion adhered to, religious habits that have a positive impact on health, pledge to heal without despair, have a complete self-concept, marital status, client perception of health and how to adapt to his current situation, the client's perspective on the cause of the disease, how to treat and transmission to others.

c. Kinship & Social factors

On social and familial factors that need to be studied by nurses: full name and nickname in the family, age or place and date of birth, gender, status, family type, decision making in family members, client relationships with the head of the family, habits carried out routinely by the family such as family gatherings, activities carried out with the community for example: participating in sports groups or recitations.

d. Cultural values & Lifeways

Values are abstract conceptions within man, of what is considered good what is considered bad. Cultural values are something formulated and established by adherents of a culture that is considered good or bad. Norms are social rules or standards of behavior that are considered appropriate. Cultural norms are rules that have a limited applicability to adherents of related cultures. Things that need to be studied related to cultural values and lifestyles are: positions and positions such as traditional chairman or director, language used, nonverbal language shown by clients, self-cleaning habits, eating habits, abstinence eating related to sick conditions, entertainment facilities commonly used and perceptions of pain related to daily activities, such as pain when lying down and unable to go to school or to the office.

e. Political and Legal factors

Applicable hospital policies and regulations are anything that affects individual and group activities in transcultural nursing care, such as rules and policies can relate to visiting hours, clients must wear uniforms, the number of family members who can wait, the rights and obligations of clients who must be contracted by the hospital, the mode of payment for clients treated.

f. Economical factors

Hospitalized clients use their material resources to pay for their illnesses to recover soon. Economic resources that are generally used by clients include: insurance, office costs, savings and joint ventures between family members. Economic factors that need to be studied by nurses include client work, sources of medical expenses, saving habits and the amount of savings in a month. Economic factors can determine whether patients or their families are treated in a room that suits their capacity.

g. Educational factors

The client's educational background is the client's experience in pursuing the highest formal education path today. In taking formal education, an experimental process occurs. A process of facing and solving problems that starts from the family and then continues to education outside the family. The higher the client's education, the more his beliefs must be supported by rational scientific evidence and can learn to adapt to

a culture that suits his health conditions. The nurse needs to assess the client's educational background including the level of education of the client and family, the type of education, and the client's ability to learn actively independently about the experience of illness so that it does not recur.

2. Nursing Diagnosis

Nursing diagnosis is a client's response to his or her cultural background that can be prevented, changed, or reduced through nursing intervention. The client's response is enforced by the nurse by identifying a culture that supports health, a culture that the client thinks is abstained from violating, and a culture that conflicts with his health. Cultures that support health include regular exercise, reading or eating vegetables. A culture that clients find abstinent from breaking such as taboo things to do or food abstinence. Cultures that conflict with health such as smoking. Three diagnoses of transcultural nursing that are often established are verbal communication disorders related to cultural differences, social interaction disorders associated with sociocultural disorientation and non-compliance in treatment related to believed value systems.

3. Planning and Implementation

Planning and implementation is a process of choosing the right strategy and executing actions appropriate to the client's cultural background. Transcultural nursing planning and implementation offers three strategies as *Leininger's* guidelines : *cultural care preservation / maintenance* when client culture does not conflict with health. (Siregar, 2016).

a. Cultural care preservation/maintenance

- 1) Identify differences in concepts between clients and nurses about the nursing process
- 2) Be calm and not rush when interacting with clients
- 3) Discuss the cultural gap that clients and nurses have

b. Cultural care accomodation /negotiation

- 1) Use language that is easy for clients to understand.
- 2) Involve families in care planning
- 3) If the conflict is not resolved, negotiate where the agreement is based on biomedical knowledge, client views and ethical standards.

c. Cultural care repartening/reconstruction

- 1) Give the client the opportunity to understand the information provided and carry it out.
- 2) Determine the degree of difference the patient sees himself from the group culture
- 3) Use a third party when necessary
- 4) Translate the patient's symptom terminology into health language that clients and parents can understand
- 5) Provide clients with information about the healthcare system

Nurses and clients should try to understand each other's culture through the process of acculturation, i.e. the process of identifying cultural similarities and differences that will ultimately enrich their cultural culture. If the nurse does not understand the client's culture, there will be a sense of distrust so that the therapeutic relationship between the nurse and

the client will be disrupted. Understanding client culture underlies the effectiveness of successfully creating a therapeutic nurse-client relationship.

4. Evaluation

An evaluation of transcultural nursing care is conducted on the client's success about maintaining a culture that is appropriate to health, reducing the client's culture that is not appropriate to health or adapting to a new culture that may be very contrary to the culture that the client has. Through evaluation, it can be known that nursing care is in accordance with the client's cultural background.(Arunasalam, N. D., & Burton, 2018).

METHOD

This research uses qualitative methods using literature where materials and materials are obtained from various journals using internet media by presenting the theory of the "Transcultural" nursing model. The method used is the Literature Review study. Literature Review is a writing design by reviewing several journals that have been published, journal search related to the title Madeleine Leininger's Transcultural Nursing Theory. Journals are searched through google scholar, sinta, garuda nursing journals. Analysis of journals using PICOT (Population, Intervention, Comparison, Outcome, Time).

RESULTS AND DISCUSSION

Based on the search results, 20 journals related to Madeleine Leininger's Transcultural Nursing theory were determined, then extraction was carried out to select by analyzing the title, population / patient, intervention / indicator, comparison / control, outcome, and duration of research.

Table 1. Journal Search Results

No	Journal Title	Population/Patient	Intervensi/ Indicator	Comparasio n/ Control	Outcome	Time/ Duration of Research
1	Surgical Room Nurse's Experience in Application Transcultural Nursing in Bali, Indonesia: A Descriptive Study Qualitative-Quantitative Analysis	106 surgical room nurse in Bali Province	Cross-sectional descriptive with exploratory sequential mixed method	Thematic analysis is used in qualitative research and Descriptive statistical analysis is used for quantitative research.	The first theme was the transcultural phenomenon in the operating room with 89 (84%) respondents stating patients asked for organs that had been operated on to be taken home. The second theme is the competence of surgical room nurses in the application of transcultural nursing with communication is the most important competence (M = 3.77 ± SD = 0.42). The surgical room nurse's incomprehension of religious, customary, cultural, and social issues of the patient and the patient's family has Risk of conflict in the perioperative nursing setting.	September sd December 2020
2	Design and validate review sheets Professional Identity of Indonesian Islamic Nurses	69 respondents were selected using the snowballing method to Islamic nurses	Questionnaire Validation Against Factors	Validate the details of the identity picture	Data analyzed by Cronbach α, obtained the results of the validity test on 13 characteristics of the professional identity of Indonesian Islamic	July 2016

Literature Review Teori Transcultural Nursing Madeleine Leininger

No	Journal Title	Population/Patient	Intervensi/ Indicator	Comparasio n/ Control	Outcome	Time/ Duration of Research
		Indonesians working in Bandung and Jakarta.	Design, dimension and construct validity.	Indonesian Islamic nurse professionals through design and build from review sheets.	nurses, each of which had a Cronbach value of $\alpha > 0.70$	
3	Nurse knowledge and application Transcultural Nursing	43 nurses with nurse criteria executors who work in the inpatient room at RSUD Abdul Manap	Observational Analytics Using Cross Sectional Design	The dependent variable in this study was transcultural nursing while Independent of the variable is the nurse's knowledge of therapeutic communication.	13 respondents who have Good knowledge, obtained 12 respondents (92.3%) have good transcultural and out of 30 Respondents who have poor knowledge, there are 22 respondents (73.3%) have less good transcultural. In conclusion, transcultural nursing is related to nurse knowledge about therapeutic communication at RSUD H.Abdul Manap Jambi City.	19 June-03 July 2022
4	Transcultural Factors of Maternal Health Perception with Toddlers ARI	propotional sampling of 100 mothers with toddler ARI in Banda Aceh City.	Data analysis was carried out by Regression test Logistics.	Quantitative using design correlational with cross sectional approach.	technological factors, cultural and lifestyle values, regulations and policy, economics and education affect the perception of mothers with toddlers ARI ($p < 0.05$), While religious and philosophical, social and kinship factors have no effect on Perception of mothers with toddler ARI ($p > 0.05$). Based on the results of this study it can be concluded that no all transcultural factors influence the perception of mothers with Toddler ARI.	September 2014
5	Health Education in Pulmonary TB Clients Reviewed from Theory Transcultural Nursing	Pulmonary tuberculosis is a chronic-infectious disease that can interfere with physical or physical problems. client's mentality.	Self-evaluation through selective, active and independent learning.	Improvement in nurses' cultural competence is still low through the Culturally Sensitive Nursing Care Training program in Patients with Respiratory Disorders.	These disorders can be in the form of disturbances in social, cultural and life spiritualclient. Such conditions can be prevented if the client has a positive outlook on his health status. To improve the nurse's positive client's attitude and outlook has an important role in providing health education by using transcultural nursing approach developed by Leininge	March 2002
6	Effective Culturally Sensitive Nursing Care Training Improve Cultural Competence Perawat	This training program takes place For 4 weeks involving 93 nurses, implementers, and	Design that Used were quasi-experiments with pre and post tests		Results of measuring the cultural competence of nurses before and After training showed a meaningful difference. Cultural	March 2018

No	Journal Title	Population/Patient	Intervensi/ Indicator	Comparasio n/ Control	Outcome	Time/ Duration of Research
		nursing care managers at a hospital in Purposively selected East Jakarta.	without a control group.		competence in terms of cultural knowledge has a value of $p < 0.001$ ($\alpha = 0.05$), from cultural attitudes of value $p < 0.01$ ($\alpha = 0.05$), and from aspects of cultural skills value $p < 0.001$ ($\alpha = 0.05$). The conclusion that can be drawn is that Nursing Care Training activities are culturally sensitive Effectively improve the cultural competence of nurses in providing nursing care.	
7	Classification Of Nursing Theory Developed By Nursing Experts: A Literature Review		Literature review approach used, which includes Collection of material in the form of books, articles, papers, journals, documentation, and libraries.		professional nurse Always develop well-sourced nursing theory theories Of the three levels of theory, namely philosophy, Gran, and Middle Existing Theories So that it can produce some theoretical practice that can be used in the giving process Nursing care	March 2022
8	The Relationship of Nurses' Knowledge About Transcultural Nursing With the attitude of nurses in providing nursing care to Different Cultural Patients at RSUD I.A Moeis Samarinda	143 people	descriptive correlation with cross approach method sectional.		The results of the Chi Square statistical test are known to be P value = 0.038 the value is smaller than alpha ($P < 0.05$) then Ho rejected means there is a significant relationship between nurse knowledge. About Transcultural Nursing with the Nurse's Attitude in Providing Nursing Care to patients of different cultures at RSUD I.A Moeis Samarinda.	March to April 2013
9	The Influence of Transcultural Nursing Approach on User behavior of Paracetamol, caffein, and carisoprodol pills in Kendari City	59 respond	Quasi-experimental with a post-test only approach control group design		The results showed that there was an influence transcultural nursing approach in taking PCC pills in Kendari City (p -value = $0.005 < \alpha$, $r = 0.375$). The r value interprets the more often the transcultural nursing approach is carried out, the greater it will be becomes a greater positive influence for PCC pill users.	
10	Excellent Culture-Based Nursing Services Affects the level of patient satisfaction In the Hospital	thirty-five nurses and one hundred and forty patients.	quasi experiment dengan rancangan pre and post with control group design		There was a significant effect ($p < 0.05$) on patient satisfaction levels after nurses received training Excellent service was culture-based before and after in the intervention group. Recommendations that can be given	March 2015

No	Journal Title	Population/Patient	Intervensi/ Indicator	Comparasio n/ Control	Outcome	Time/ Duration of Research
					It is necessary to increase the role of supervision so that its sustainability is maintained	
11	Influence of Sunrise Model Nursing Care Approach To Inpatient Satisfaction	14 respondents in the treatment group and 14 in the control group	pseudo-experiments (Quasi Experiments)		There are differences in characteristics between treatment and control groups in terms of age, gender, income. Patient satisfaction through the provision of sunrise nursing care The model proved effective at Mitra Husada Hospital, Pringsewu Regency (p value=0.000).	February- August 2018
12	Transcultural Nursing Approach to Community Perception About Palliative Care in Kuta Traditional Village, District Tambaksari	59 people	Quasi Experiment with One Group Pre Post-Test Design Approach		flat flat perception community before the implementation of the transcultural nursing approach which was 3.65 and after implementation The transcultural nursing approach is 10.26, the paired t-test results get a value of p = 0.00, because the p-value is < 0.05 then it is concluded that the hypothesis is accepted or there is an influence of the transcultural nursing approach on public perception of palliative care in Kuta Traditional Village, Tambaksari District, Regency Ciamis	November 2022
13	Overview of Student Ability in Application Transcultural Nursing	FIK nursing students	descriptive with cross-sectional approach (cross sectional)		The level of student dissatisfaction in learning is balanced with the proportion of learning satisfaction, while For the application obtained, the majority of extension students are able to apply well transcultural nursing.	
14	Maternity Care Practices in Pohijo Village, Sampung Ponorogo Subdistrict: Transcultural Analysis	Participant 6 People consist of 4 mothers who have been pregnant, 1 midwife and 1 birth attendant	qualitative with phenomenological approach		Cultural practices that should be restructured because they conflict with health include: Do not eat salak fruit, do not eat jackfruit and kluweh vegetables, do not cut / kill Animals, do not eat at the door, do not eat by biting. The important role of community leaders to be involved in restructuring cultures that conflict with health	February 2020
15	Family Nursing Care Improves Independence in Caring for Tuberculosis Patients	28 respond	Quantitative with Pre-Experiment design One approach Group Pretest Postest,		there is an influence between the implementation of Family Askep on family independence with family members with TB sufferers with a Z value of -3.450 with Z table ($\alpha=0.05$) which is -1.96 so Z calculate	Year 2014

No	Journal Title	Population/Patient	Intervensi/ Indicator	Comparasio n/ Control	Outcome	Time/ Duration of Research
					> Z table. Thus Ho is rejected and Ha is accepted. This result can also be explained by the value of Asymp.sig which is 0.000, meaning p value < α (0.000 < 0.05). It is expected that puskesmas nurses can run the program Perkesmas as a mandatory program, especially in treating TB patients so that families will be able to independently treat family members affected by TB.	
16	Relationship of Nurse Characteristics and Organizational Characteristics with Behavior Caring Nurse Executor in the Inpatient Room of Kartika Husada Hospital Pontianak 2017		cross-Sectional using a quantitative approach.		There is a relationship between communication patterns and behavior Caring Nurse Acting in the Inpatient Room of Kartika Husada Hospital Pontianak. Nursing management can be a good mediator to increase efforts For Implementing Nurses in Improving Caring Behavior	April-June 2017
17	Retracted: Effectiveness of Chinese Native Culture Education for Improving Undergraduate Nursing Students' Transcultural Self-Efficacy	Undergraduate nursing students (n = 79)	quasi-experimental design with pretest and posttest was used. We recruited nursing students from 4 classes of the School of Nursing		Students who participated in Chinese native cultural education significantly improved their transcultural self-efficacy in three dimensions: cognition, emotion, and practice. Compared with the control group, the students in the cultural education group had higher change scores in three sizes of transcultural self-efficacy.	2016
18	Early Marriage Based on Transcultural Nursing in Kara Village Torjun Sampang District Madura	39 people	Analytical discriptive design with cross sectional type		Relationships that Significant between cultural factors (p = 0.013), family support factors (p = 0.001), economic factors (p = 0.040), and factors technology (p = 0.002) with early marriage while knowledge factor is not related to early marriage happened in Kara Village.	January 2015-February 2016
19	Nurse knowledge and application Transcultural Nursing	43 people	Observsional analytics using design cross-sectiona		13 respondents who had good knowledge, 12 respondents (92.3%) had good transcultural and of 30 respondents who had poor knowledge, there were 22 respondents (73.3%) had poor transcultural.	Year 2022
20	Food Confidence in a Nursing Perspective Transcultural in Pregnant Women	5 persons	qualitative with approach ethnography.		There are restrictions and recommendations for certain foods during pregnancy. Prohibited foods include mutton, salty food, pineapple, durian, spicy food, herbal medicine-	Year 2019

No	Journal Title	Population/Patient	Intervensi/ Indicator	Comparasio n/ Control	Outcome	Time/ Duration of Research
					Herbs, watermelons, sweets, and ice. These foods are believed to harm the mother pregnant and fetus. While the recommended food is fish that is not scaly and many drink water.	

Discussion

This study provides an analysis of this theory as follows:

1. Advantage

This theory is comprehensive and holistic in nature that can provide knowledge to nurses in providing care with different cultural backgrounds. This theory is very useful in every treatment condition to maximize the implementation of other theoretical models. The use of this theory can overcome barriers to cultural factors that will impact patients, nursing staff and hospitals. The use of transcultural theory can help nurses to make competent decisions in providing nursing care. The use of transcultural theory can support the achievement of nursing care goals with a cultural approach to patient safety. This theory is widely used as a reference in research and development of nursing practice.

2. Weaknesses

Transcultural theory is so broad that it cannot stand alone and is only used as a companion to various other conceptual models. This transcultural theory does not have a specific intervention in overcoming nursing problems so it needs to be combined with other theoretical models.

CONCLUSION

This theory can be used in providing nursing care to patients by considering aspects of culture, values, norms and religion. This theory can be used to complement other conceptual theories in nursing care practice. The development of nursing actions by promoting positive health behaviors towards patients in accordance with the patient's culture and creating culturally caring care with transcultural nursing can shape a person's perceptions, motives, behaviors, identities, values, ways of communication, and emotions according to the culture in daily life.

REFERENCES

Alligood, M. R. (2018). *Nursing Theorists and Their Work. 9th ed. St. Louis, Missouri: Elsevi.*
 Andrews, M & Boyle, J. (1995). *Transcultural Concepts in Nursing Care, Second edition, Philadelphia, J.B Lippincot Company.*
 Arumsari, D. P., Emaliyawati, E., & Sriati, A. (2017). *Hambatan Komunikasi Efektif Perawat Dengan Keluarga Pasien Dalam Perspektif Perawat. Jurnal Pendidikan Keperawatan Indonesia, 2(2), 104-114.*
 Arunasalam, N. D., & Burton, R. (2018). *Investigating Malaysian Nurses' Perspectives Of Intercultural Teaching In Transnational Higher Education Learning Environments. Nurse Education Today.*

- Busher Betancourt, D. A. (2015). *Madeleine Leininger and the Transcultural Theory of Nursing. The Downtown Review. Iss, 2(1), 1–8.*
- Cherry, B., & Jacob, S. . (2014). *Contemporary Nursing: Issues, Trends & Management. Ecosystems and Human Well-being: A Framework for Assessment (Vol. 6).*
- Felsenstein, D. R. (2019). *Providing Culturally Sensitive Nursing Care for Vulnerable Immigrant Populations, 25(2), 4535.*
- Garcia, G.C.R., Caicedo, J. I. M., Reina, H. A. R., Martinez, M. L. O., Segura, C. M. C. Pereira, L. A. M., Torres, P. M. P. (2016). *Taking Action To Improve Haelth Literacy In Colombia: Knowledge Transfer And Information And Communication Technologies Platform As Health System Responses. The International Journal Of Communication And Health.*
- Husada, S. T. I. K. B. (2016). *Faktor-Faktor Yang Mempengaruhi Kinerja Perawat Dalam Pelayanan Keperawatan di Rumah sakit Muhammadiyah Palembang tahun2015. jurnal kesehatan bina husada, 11(4).*
- Siregar, N. S. S. (2016). *Komunikasi Terapeutik Dokter dan Paramedis Terhadap Kepuasan Pasien dalam Pelayanan Kesehatan pada Rumah Sakit Bernuansa Islamidi Kota Medan.*
- Suroso, Haryati TS, M. (2015). *Pelayanan Keperawatan Prima Berbasis Budaya , 18(1), 38–44. <https://doi.org/10.7454/jki.v18i1.396>.*
- Wulandari, A. (2016). *Improve The Ability Of Students To Maintain, Menegosiasi Nursing Practice And Restructured Culture-Based Neonatal Bima Through The Application Of Sunrise Model In Pkm Asakota Bima City: Action Research, 10.*
- Yilmaz, M., Toksoy, S., Direk, D., & Bezirgan, S. (2017). *Cultural Sensitivity Among Clinical Nurses : A Descriptive Study, 1–9. <https://doi.org/10.1111/jnu.12276>.*