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Research Article

WAR, MASS MIGRATION AND NURSING CARE: A MULTICULTURAL PERSPECTIVE ON SYRIAN WAR AND TURKEY

Fadime Çınar and Halil Şengül

Sabahattin Zaim University Faculty of Health Sciences, Health Management Istanbul, Turkey

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ABSTRACT

Researches on nursing care have showed that cultural dimensions and orientation of the society factors are important for nursing care process. In addition, it may be argued that nursing care is strongly related with structure of the society. Multiculturalism, which is a social process brings different societies in a unique structure, is another factor affecting nursing cares. Multiculturalism and merging of different cultures needs long duration. On the other hand, war and mass migration change effect mechanism of multiculturalism, and causes a rapid change in social structure. Nursing care process is also affected from mass migration. In this research, it is aimed to evaluate effects of Syrian war on nursing care services in Turkey. For this aim, total (n=20) professional nurses were subjected to semi-conducted interview with focus groups. Results of the study showed that there are two main difficulties in nursing care after mass migration: political issues, and humanitarian issues.

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INTRODUCTION

Nursing care has a vital role on medical treatment. Although giving right treatment procedure to patients is important, applying of treatment also has importance in treatment of diseases. In addition, nursing care also provides prophylaxis of diseases in a society, and provides more qualified life standards. In order to give effective and productive nursing cares, nurses must be oriented to the society (Expósito *et al*, 2018; Hertel-Joergensen *et al*, 2018; Plaku-Alakbarova *et al*, 2018). The main reason for this requirement is that nursing care is not an acute service; it needs an interaction between patient and nurses.

Interaction between individuals in a society includes social and cultural patterns. Thus, social orientation is an important part of the nursing care and nursing educations. In application, nursing candidates or nurses who change their operation area needs to take orientation programs. Nursing is also a cultural and social interaction process. Within this process, patient and nurses share same society, and social standards. At this point, level of social shared values has directly effect on success of nursing care processes. It is reported in many researches that social adaptation and orientation has positive impact on patients trust to medical treatment procedure and nursing applications (Choi, 2018; Greenwood *et al*, 2018; Marino *et al*, 2018; Jueng *et al*, 2017; Gadecka *et al*, 2015).

Increase in communication and transportation opportunities have increased social interaction of different societies. As a result of these interactions, multiculturalism term has become important for all fields related with humanity and service sectors. In general, multiculturalism is defined as living different social structures in a same environment (Sam, 2018; Sánchez-Sánchez *et al*, 2017; Yeo and Pang, 2017; Yampolsky and Amiot, 2016; Logvinova, 2016). This means that multiculturalism is a process in which different cultures get together to construct a new cultural structure.

Our past experiments and social researched showed that adaptation of a culture or cultural change needs long times than change in technology and daily life. In other words, individuals change rapidly their daily life according to economic and other reasons, but their cultures resist to this change, and thus, multiculturalism term is defined.

Another social change is mass migration. Mass migration is defined as migration of crowd people in a short time due to some extraordinary events such as war, natural forces etc. Mass migration is a great and comprehensive change compared to migration or immigration. In migration process, individuals change their living environment based on their requirements. On the other hand, mass migration does not give a selection to individuals, and they do not have required time to adapt new

*Corresponding author: **Fadime Çınar**

Sabahattin Zaim University Faculty of Health Sciences, Health Management Istanbul, Turkey

society, even new life standards or accommodation (Fox *et al*, 2017; Abramitzky *et al*, 2013). For this reason, great social and cultural changes, conflicts, social reactions may be realized in mass migrations, as well as cultural conflicts.

In this research, it is aimed to evaluate effects of mass migration due to war in Syria on Turkey in the perspective of nursing care. According to this aim, 20 field experts subjected to a semi-conducted interview, and their experiences on different culture structures sourced from mass migration were examined.

METHOD

This research was patterned in descriptive survey method. In the research, total 20 nurses operating in different public and private hospitals in Istanbul Province during 2018 year were subjected to semi-conducted interview. Participants were asked to answer following questions:

1. What is your opinion on mass migration? Do you think that mass migration affects nursing cares?
2. What kind of events you experienced during working with immigrant people?
3. What are negative effects of mass migration on nursing cares in your opinion?
4. What kind of measurements may be taken in order to reduce negative effects of mass migration?

RESULTS

Demographic properties of participants were shown in the Table 1.

Table 1 Demographic properties of participants

Parameter	Value, n (%)
Hospital type	
Public	9 (45.0)
Private	11 (55.0)
Age	
Under 25 years	12 (60.0)
26-35 years	5 (25.0)
36 years and higher	3 (15.0)
Experiment	
Under 5 years	10 (50.0)
5-10 years	7 (35.0)
11 years and higher	3 (15.0)

What is your opinion on mass migration? Do you think that mass migration affects nursing cares?

All of the nurses participated to the research stated that migration is a humanity problem, and negatively affects nursing cares (N1-N20). On the other hand, they stated that negative affecting of nursing care is not fault of immigrants; the fault is related with political institutions and politicians (N3-N18).

What kind of events you experienced during working with immigrant people?

Most of the participants stated that communication is main problem for immigrant people (N2-N8, N10-N18). Other indicators are cultural differences (N2, N4, N5, N6, N8, N12, N14, N15, N17), fear from different cultures (N2, N7, N8, N11, N16, N19, N20), and lack of trust (N1, N6, N8, N9, N12, N13, N15, N18).

What are negative effects of mass migration on nursing cares in your opinion?

Participants stated that cultural deformation (N1-N8, N10-N20), increasing work load (N3, N5-N17, N19, N20), and inadequate labor due to changes in public structure (N1, N3, N5-N17, N19, N20). Participants mainly stated that since immigrants change their countries for war reason, they have serious adaptation problems.

What kind of measurements may be taken in order to reduce negative effects of mass migration?

All participants stated that immigrants from Syrian war must be psychologically supported and subjected to orientation programs (N1-N20). In addition, there may be several measures must taken such as increasing nurse professionals (N2, N4, N5, N7, N8, N11, N14-N19), increasing working standards of nurses (N1, N2, N3, N7-N16), vocational educations, and cooperation of public organizations (N3, N7, N8, N11, N15, N17, N19).

DISCUSSION

Migration has negative effects of individuals, and it has also negative effect on society. The main reason for this result is that human being is somehow related with its physical environment. In migration process, individual or social groups seek to find more feasible places to live. On the other hand, they spend their history to gain more comfortable life. This comfort may be economic issues, working conditions, education or health related. Whatever its reason, the importance at this point is that migration not only changes places in which people live, but also effects social and cultural aspects (Fox *et al*, 2017; Abramitzky *et al*, 2013). This changing procedure also effects social structure of hosting country.

There have been many researches reported that social structure has vital importance on nursing care. Nursing services not only giving a medical treatment, but it also includes social interaction. In addition, a great deal of researches argued that interaction between patient nurses also must be determined as a part of medical treatment (Expósito *et al*, 2018; Hertel-Joergensen *et al*, 2018; Plaku-Alakbarova *et al*, 2018; Choi, 2018; Greenwood *et al*, 2018; Marino *et al*, 2018; Jueng *et al*, 2017; Gadecka *et al*, 2015). For this reason, it may be argued that social changes are also part of medical treatment procedures. Thus, social changes such as migration may be evaluated as a risk factor for medical treatment procedures.

Underlying importance of social change in nursing care and medical treatment, another issue must be mentioned. Migration and mass migration concepts are two different processes, although they are classified as types of migration. Both mass migration and migration processes results “immigrant”. At this point, it is better to name these people as “migrated” people instead of “immigrant”. Immigrant term means individuals migrated for various reasons to change their life and to have a better life. On the other hand, mass migration is not related with better life, it is directly related with life saving and compulsory reasons. Thus, psychology of “migrated” people must be worse than “immigrant”. As a result of this, their social adaptation and including in multicultural structure is more difficult. These difficulties also reflect to nursing cares. A

person who is not able to interact even ordinary people surely will face difficulties with a specialist individual, a nurse.

CONCLUSION

Results of the study showed that mass migration due to war or other extraordinary events not only effect domain country's culture and social structure, but it also affects multicultural structure balance and social constitutions. In addition, mass migration has negative effects on immigrant people.

References

- Abramitzky, Ran, Leah Platt Boustan, Katherine Eriksson (2013). Have the poor always been less likely to migrate? Evidence from inheritance practices during the age of mass migration. *Journal of Development Economics*, Volume 102, May 2013, Pages 2-14.
- Choi, Yun-Jung (2018). "The value of psychosocial group activity in nursing education: A qualitative analysis". *Nurse Education Today*, Volume 64, May 2018, Pages 65-70.
- Expósito, Judit Sánchez, César Leal Costa, José Luis Díaz Agea, María Dolores Carrillo Izquierdo, Diana Jiménez Rodríguez (2018). "Ensuring relational competency in critical care: Importance of nursing students' communication skills". *Intensive and Critical Care Nursing*, Volume 44, February 2018, Pages 85-91.
- Fox, Stephen, Idriss El-Thalji, Safwan A. Altarazi (2017). Good intentions with limited outcomes: Three limitations of trying to reduce mass migration with industrial thinking. *Technology in Society*, Volume 50, August 2017, Pages 31-32.
- Gadecka, Wioletta, Krystyna Piskorz-Ogórek, Kamila J. Regin, Ireneusz M. Kowalski (2015). Social competence of mental health nurses. *Polish Annals of Medicine*, Volume 22, Issue 2, September 2015, Pages 105-109.
- Greenwood, H. Gillian Mezey, Raymond Smith (2018). Social exclusion in adult informal carers: A systematic narrative review of the experiences of informal carers of people with dementia and mental illness. *Maturitas*, Volume 112, June 2018, Pages 39-45.
- Hertel-Joergensen, Michala, Charlotte Abrahamsen, Carsten Jensen (2018). Translation, adaptation and psychometric validation of the Good Perioperative Nursing Care Scale (GPNCS) with surgical patients in perioperative care. *International Journal of Orthopaedic and Trauma Nursing*, Volume 29, May 2018, Pages 41-48.
- Jueng, Ruo-Nan, Shu-He Huang, Tsui-Ping Li, Hui-Yu Liang, Chiu-Mieh Huang (2017). Application of a Q Method Study to Understanding Nurses' Perspective of Adopting Evidence-Based Nursing. *Asian Nursing Research*, Volume 11, Issue 4, December 2017, Pages 253-260.
- Logvinova, Olga K. (2016). Socio-pedagogical Approach to Multicultural Education at Preschool. *Procedia - Social and Behavioral Sciences*, Volume 233, 17 October 2016, Pages 206-210.
- Marino *et al.* (2018). Social media use profile, social skills, and nurse-patient interaction among Registered Nurses in tertiary hospitals: A structural equation model analysis. *International Journal of Nursing Studies*, Volume 80, April 2018, Pages 76-82.
- Plaku-Alakbarova, Bora, Laura Punnett, Rebecca J. Gore (2018). Nursing Home Employee and Resident Satisfaction and Resident Care Outcomes. Safety and Health at Work, In press, corrected proof, Available online 8 January 2018.
- Sam, David L. (2018). Understanding positive immigrant youth adaptation in the context of multiculturalism. *Journal of Adolescence*, Volume 62, January 2018, Pages 222-225.
- Sánchez-Sánchez, Laura C., Sagrario Salaberri, M^a del Mar Sánchez-Pérez (2017). Multiculturalism and Internationalization in Spanish Universities: ¿North-south Socio-cultural Differences?. *Procedia - Social and Behavioral Sciences*, Volume 237, 21 February 2017, Pages 1125-1130.
- Yampolsky, Maya A. and Catherine E. Amiot (2016). Discrimination and multicultural identity configurations: The mediating role of stress. *International Journal of Intercultural Relations*, Volume 55, November 2016, Pages 86-96.
- Yeo, Su Lin and Augustine Pang (2017). Asian multiculturalism in communication: Impact of culture in the practice of public relations in Singapore. *Public Relations Review*, Volume 43, Issue 1, March 2017, Pages 112-122.

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