

Nursing Care in Migrant People: An Approach from the Cultural Perspective

Cuidado de enfermería en personas migrantes:
abordaje desde la competencia cultural

Cuidados de enfermagem para migrantes: uma
abordagem de competência cultural

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What must Nursing Professionals Know about International Migration?

In the year 2020, international migrant people (IMP) surpassed 281 million, a number that augmented in 2024; diverse are the theories that try to explain the causes of this phenomenon, within which those associated with economic factors, like the Neoclassic Theory of Migration or the Dual Job Market Theory, aside from those that emphasize the support networks present in the appearance of institutions, or in the ones that state the existence of migration systems (1, 2). There is also a recognition that these movements are associated with topics such as the wars in Ukraine and Palestine, natural disasters, and even the geopolitical conditions of each country (3). Only in America, the International Organization for Migration (IOM) stated that in 2023 there was a 62% rise in irregular migration compared to 2022, and it estimated in that same year, in the region known as Tapón del Darién (Panama), that more than 500 thousand people crossed, most of them of Venezuelan origin (4). To begin this process, the IMP must have an optimum health state, necessary to face the road's challenges to the destination country. Precisely, because of the conditions in which the transit through various countries occurs, the vulnerability of the IMP increases. This situation impacts the development of risk behaviors and situations for health (4-6).

The social determinants the IMP face in their countries of origin, transit, and destination influence the modification of the health state, such as discrimination (7), abuse due to gender, irregular stay in the country of transit, academic level, income (8), organized crime, human trafficking, and, particularly, lack of accessibility to quality health services in all stages of their transit (9). This causes dangerous situations and behaviors that can impact their diet, sexual and reproductive activities, mental health, and even the appearance and complication of chronic degenerative issues (10).

In this way, health-associated problems, that put the lives of these people at risk, can be those associated with infectious-transmissible diseases (malaria, hepatitis B, hepatitis C, HIV-Aids), disorders caused by environmental factors and animals (dehydration, sunburns, hypothermia, snake bite, scorpion sting), injuries due to violence (sexual harassment and homicide), traffic accidents, drownings, mental health issues (stress, depression, anxiety, PTSD), and even the presence of vaccination preventable diseases (tetany, influenza, COVID) (11). Additionally, IMP may suffer or develop chronic diseases (non-transmissible diseases) like being overweight, obesity, diabetes mellitus, hypertension, and dyslipidemia as a consequence of lifestyle changes (12, 13). Other types of situations regarding the migrant population's health are addictions like alcohol, tobacco, or other type of illegal substance consumption (14-16).

For this reason, international organisms claim to respect and implement the right to health protection of IMP (17, 18). However, the

different sanitary politics between countries and the lack of health professional training in intercultural health influences that IMP cannot access those services. It is precisely in this scenario that nursing gains relevance as a changing agent. Its impact on the care of IMP is observed in the efforts to ensure their access to first-level attention, where the prevention of disease and promotion of health are essential because, in this mobility and transit contexts, there is a need for the development of nursing assessments and interventions that are sensible to their needs and conditions (19).

An indispensable tool in the care of migrant people is cultural competence; that is, the ability to know and understand how a health problem is culturally constructed, from its meanings and interpretations, and the application those have in everyday life. These competencies are supported by the theoretical contributions of transcultural nursing that invite to provide culturally competent care (20), as in the case of the cultural care and ethno-nursing theory (21), or from other models that in a particular way aim to define more clearly the ways to know the other (22, 23). Additionally, the literature states that the application of cultural competence can be of great help in the care of IMP because it provides relevant knowledge to avoid ethnic-centered practices and prevents conflicts derived from the personal relations health-patient (24, 25).

It is in that way that caring for another makes more sense when the nursing personnel understands the worldview, beliefs, and thoughts of people, that is, he/she aims to know their culture, traditions and forms of care (22). That moment of connecting with people from different cultural contexts is contemplated as a great opportunity to strengthen the care relationship, thinking about it as the moment when a real connection can be reached that allows to generate bonds and offer culturally congruent care.

Conclusion

It is necessary to raise awareness about IMP in the health systems as a vulnerable population, a situation that implies rethinking the ways of acting present until now by the health personnel. The literature suggests that improving the knowledge about the culture of IMP could reduce the conflicts derived from the differences associated with language or traditions. The development of culturally congruent care, especially in transit countries, may favor the reduction of health risk factors and situations. In each country through which IMP transit, they encounter different systems and requisites to access health services, like xenophobia and discrimination. To avoid this, it is necessary to reinforce in the generations of nursing professionals the importance of cultural competence, mastering other languages, and international mobility to consolidate global nursing and health that is mindful of the international patients' needs, especially of those who migrate to have a better quality of life (26-28).

4 Referencias

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